Centers for Medicare & Medicaid Services
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# Federally Facilitated Marketplace (FFM)
# Direct Enrollment API for Web Brokers/Issuers
## Technical Specifications

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# APPROVALS

**Submitting Organization's Approving Authority:**

| Signature | Printed Name | Date | Phone Number |
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| | | | |

**CMS' Approving Authority:**

| Signature | Printed Name | Date | Phone Number |
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# REVISION HISTORY

| Version | Date | Organization/ Point of Contact | Description of Changes |
|---|---|---|---|
| 0.1 | 03/31/2013 | CGI/Lakshmi Manambedu | Draft |
| 1.0 | 04/05/2013 | CGI/Lakshmi Manambedu | Initial Release |
| 1.1 | 04/25/2013 | CGI/Betty Fine | Updated to align with Canonical Data Modeling analysis findings, include additional SAML assertion details, and clarify business rules. |
| 1.2 | 04/30/2013 | CGI/Betty Fine | Updated to align with Canonical Data Modeling analysis findings for the Submit Enrollment/Change/Disenrollment Transaction web service. Updated terminology outside of the data elements to reflect the naming change of FFE to FFM except in the technical data element and services names. |
| 1.3 | 05/10/2013 | CGI/Betty Fine | • Revised APTC Attestation related data elements (added Other Person in Fetch Eligibility service, move APTC Attestation in Submit Enrollment service to a separate segment and updated data elements) <br> • Added description of how to collect APTC attestation in section 7.3.2.2. <br> • Added agent/broker and lead generation scenarios to Key Scenarios section. <br> • Corrected Relationship Code values to match values allowed on the 834. |
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# 1.    Introduction

This document presents the specifications for the Direct Enrollment Application Programming Interface (API) exposed by the Federally Facilitated Marketplace[1] (FFM) to Web Broker and Issuer websites (collectively referred to as partner websites in this document).

The purpose of the document is to communicate the overall approach to implementing the FFM Direct Enrollment API. The document identifies and provides an overview of various points of integration between partner websites and the FFM - User Interface Integration as well as web services integration.  Future versions will enhance the content of this document with more specific business rules and integration specifications.

Consumers shopping for Health Insurance for themselves and/or their household members would have the choice of enrolling into a Qualified Health Plan (QHP) by accessing the FFM website directly or by shopping via a partner website. The API described in this document would facilitate integration between partner websites and the FFM to support consumers shopping/ enrolling in Qualified Health Plans (QHPs) through partner websites.

The FFM will support two models for Partner websites to integrate their consumer shopping experience with the FFM:

- **Direct Enrollment API:** Under this model, partner websites will use User Interface Services and Web Services provided by the FFM to implement a consumer's eligibility determination and plan shopping functions.

- **Lead Generation API:** Under this model, partner websites will provide educational content and do pre-selling of their plans before transferring the consumer to the FFM website. The consumer will complete all functions including eligibility determination, plan shopping and enrollment on the FFM. However, the partner website will be able specify Issuer/Plan filters that the FFM would apply as part of the consumer's plan shopping. This model is offered as an alternative to the Direct Enrollment API to support Issuers that may not be ready to implement the full Direct Enrollment API.

**Determining Eligibility - Background Information**

Consumers seeking to enroll in coverage through the Exchange need to submit an application to the FFM for determining eligibility for QHP and, if interested, for advance payment of premium tax credit (APTC) and cost-sharing reductions (CSRs). If determined eligible, the consumer can enroll into a QHP through the FFM. The eligibility determination process includes collection and verification of demographic and income information and verification of information from federal data sources such as the Social Security Administration (SSA) and Internal Revenue Service (IRS). As part of the application process, for individuals seeking financial assistance the FFM would also determine/assess household member's eligibility for Medicaid or CHIP. Individuals eligible for Medicaid or CHIP would not be eligible for financial assistance on the exchange and would be transferred by the FFM to the appropriate state agency for enrollment in Medicaid or CHIP.

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[1] For purposes of this document, the term "Federally-facilitated Marketplace" also includes State Partnership Marketplaces.

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IRS regulations prohibit third party sites (such as those of Web Brokers and Issuers) from accessing Federal Tax Information (FTI). This restricts the ability to seamlessly integrate the eligibility application (even using web service calls to the FFM) as part of the shopping experience on a partner website. Also, the process for determining eligibility for Medicaid, CHIP, APTC, and CSR involves a complex UI workflow that is best implemented by the FFM. Consequently, a consumer trying to enroll in a QHP through a partner website would need to be transferred to the FFM to submit an eligibility application.

**Direct Enrollment**

In the direct enrollment process model, the consumer will be redirected to the FFM website to complete their eligibility application. Upon receiving an eligibility determination, the consumer would be transferred back to the partner website to continue plan shopping and selection for individuals eligible for a QHP, with or without financial assistance. It is worth noting that any individual(s) in the application determined eligible for Medicaid or CHIP would not be processed by the partner website.

Upon completion of plan shopping and selection in the direct enrollment model, the partner website would submit enrollment requests to the FFM through a web service invocation. The enrollment requests would be processed by the FFM and sent to the QHP Issuer. Section 1.3 New Consumer Process Flow Diagram illustrates the process flow for a consumer shopping for QHPs through a partner website.

The FFM Direct Enrollment API will provide partner websites access to FFM eligibility and enrollment business services through a combination of secure transfers of the consumer to and from the FFM website and web services. The secure transfer of the consumer between the FFM and the partner website would be used for submission of the eligibility application (for initial eligibility determinations as well as changes in circumstance). The plan shopping experience including submission of the plan selection would be implemented by the partner website using their own shopping and rating tools.

The endpoints for web services will be managed by the Federal Data Services Hub (DSH). The DSH will also manage Trading Partner Agreements, onboarding, and monitoring of the partner websites.

**Lead Generation**

The Lead Generation model is offered as an alternative to the Direct Enrollment API for Partner websites that will not be able to implement plan shopping and enrollment functions integrated with the FFM. Under this model, once transferred to the FFM, the consumer will remain on the FFM website for all functions including eligibility determination, plan shopping, and selection. The Lead Generation model will use a subset of the Direct Enrollment API services, namely the User Interface transfers. A partner website can transition to the full Direct Enrollment API when they are ready to implement web services integration with FFM.

**Agents/ Brokers**

Both the Direct Enrollment API and the Lead Generation API would also include support for licensed Agents and Brokers associated with the partner website. Agents and Brokers can use the API services to assist consumers with eligibility determination and enrollment. Please see section 3.2.2 Agents and Brokers for more information.

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**Document Organization**

The remainder of this document is organized as follows:

- Section 2 - Key Considerations
- Section 3 - API Interaction Model
- Section 4 - API Interaction Scenarios
- Section 5 - API Interfaces
- Section 6 - User Interface Integration
- Section 7 - Web Services Integration
- Appendix A - Code Values/ Descriptions
- Appendix B - Key Interaction Scenarios

*Section* 2 *- Key Considerations* lists the considerations driving the design of this API.

*Section* 3 *- API Interaction Model* illustrates the high level end-to-end interactions involving the partner website, the Federal Data Services Hub and the FFM.

*Section* 4 *- API Interaction Scenarios* lists the primary business scenarios that drive the interaction between the partner website and the FFM. Appendix B - Key Interaction Scenarios includes the sequence of activities, on the FFM as well as the partner website, corresponding to each of these scenarios. It is to be noted that other more complex scenarios can be addressed as combinations of these primary scenarios. For simplicity, the FFM and DSH have been treated as a single entity while presenting the sequence of activities.

*Section* 5 *- API Interfaces* lists the various interfaces/services to be provided by the FFM to support the interactions described in Section 4. For each interface a brief description is included along with the inputs and outputs for that interface.

*Section* 6 *- User Interface Integration* provides details on the interface between the partner website and the FFM to securely transfer the consumer to the FFM and back to the partner website.

*Section* 7 *- Web Services Integration* provides details on the web services that would be exposed by the FFM for partner websites to perform the plan shopping and selection process.

*Appendix A* includes lists of values for codes used in the interfaces along with their descriptions.

*Appendix B* includes the sequence of activities on the FFM as well as the partner website to complete the consumer's experience in each of the key scenarios identified in Section 4.

## 1.1. Intended Audience

The target audience for this technical specifications document is the business/technical stakeholders of the partner websites.

## 1.2. Key Terms

The key terms used in this document are:

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- Web Broker - A web-based entity licensed by a State as a broker and providing a website that consumers can use to shop for plans offered by multiple issuers, an in compliance with 45 C.F.R. 155.220(c)(3) for individual market QHPs.

- Issuer - An entity licensed by the State as an insurance producer that offers a QHP in accordance with a certification from an Exchange.

- Agent/Broker - A person licensed by the State as an agent, broker; may be independent, members of a brokerage or an employee of an issuer or a web-broker.

- Partner - Collectively, Web Brokers and Issuers are being referred to as partners.

- Applicant - An individual who wishes to apply or has applied for eligibility to enroll in a QHP.

- Consumer - A person who has engaged a Web Broker or Issuer seeking to enroll himself/herself and/or other applicants that they are associated with in a QHP. In relation to the applicants, the Consumer must be someone who is an adult who is in the applicant's household, as defined in 42 CFR 435.603(f), or family, as defined in section 36B(d)(1) of the Code, or if the applicant is a minor or incapacitated, someone acting responsibly for an applicant.

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## 1.3. New Consumer Process Flow Diagram

Figure 1 provides the Web Broker/Issuer new consumer process flow using the Direct Enrollment API.

**Figure 1 - Web Broker/Issuer - Direct Enrollment API Process Flow**
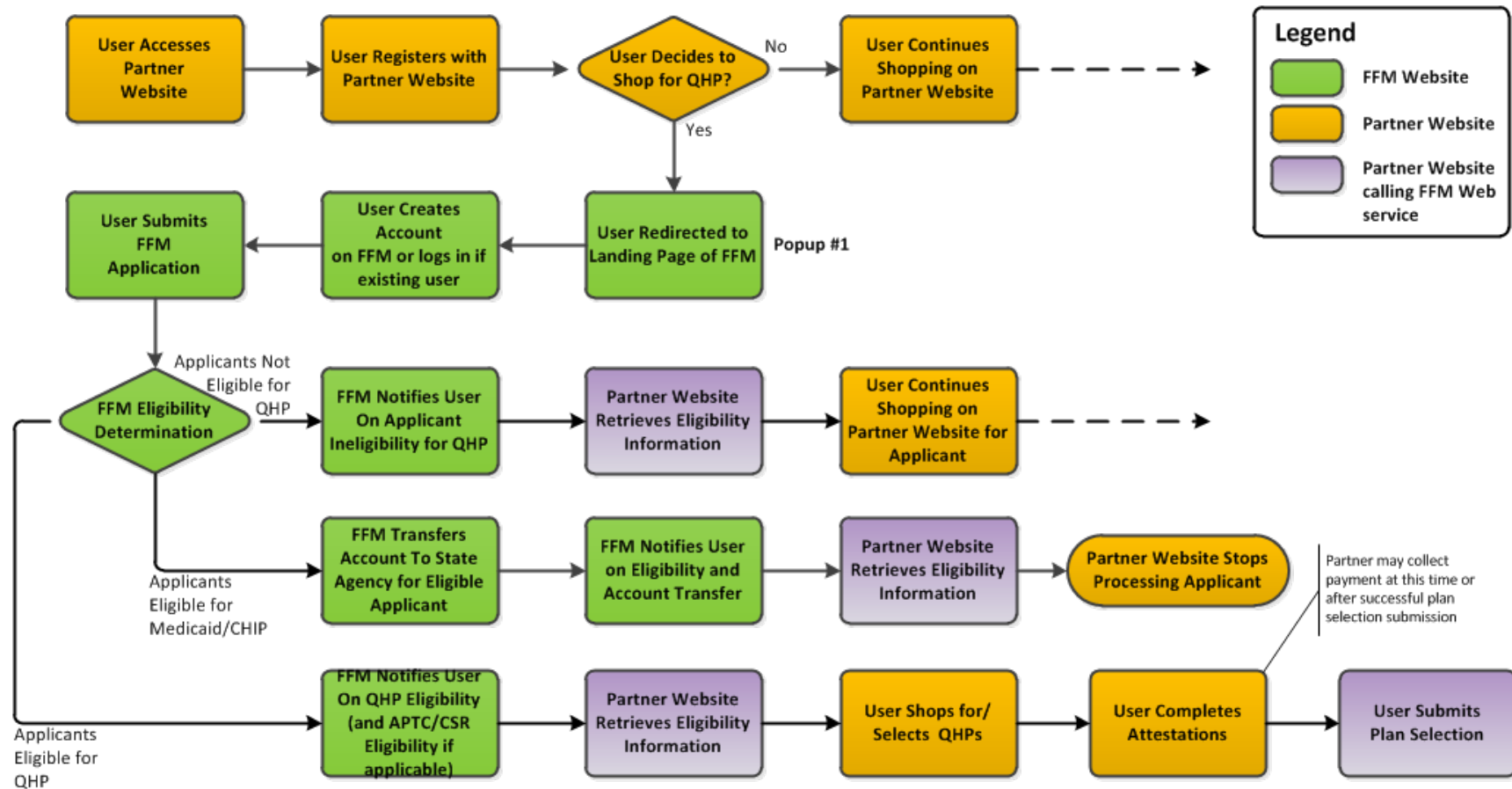
# 2.    Key Considerations

The following is a list of key considerations:

1.    IRS regulations prohibit third party sites (such as Web Brokers and Issuer portals) from accessing Federal Tax Information (FTI). This restricts third parties' ability to verify income information that is integral to eligibility determination for Financial Assistance. Also, the eligibility determination process includes a complex orchestration of workflow/ business rules for Medicaid/CHIP eligibility (including state specific options) and QHP, APTC and CSR eligibility. These were the key drivers for the design approach that involves transferring the consumer to the FFM for completing the eligibility determination process.

2.    Consumers can make both initial plan selection and changes through the partner websites using the direct enrollment process flow. Changes include changes in demographics, membership (add/remove members) and disenrollments.

3.    The API interactions will include Web services as well as User Interface Integration with the FFM.

4.    The User Interface Integration would involve secure transfer of the consumer to the FFM and back to the Issuer.

5.    The consumer workflow would involve one transfer of the consumer to the FFM.  The transfer would be for the consumer to create an account (or login to a previously created account) and fill out and submit an eligibility application.

6.    Agents and Brokers would use the same workflow within the FFM as a consumer. However, there would be additional steps for Agents and Brokers for registering a consumer with the FFM or to associate with a consumer that is already registered with the FFM.

7.    The interactions from Web Brokers and Issuers will largely be similar and supported by the same set of services exposed by the FFM. Variations in interactions will be realized through appropriate composition and parameterization of the API calls.

8.    Partner websites will use the FFM Household/Eligibility web service to retrieve demographic and eligibility information on the applicants. The partner websites will also use the FFM enrollment web service to submit requests for initial enrollment, changes and disenrollments. The QHP shopping experience including plan search/compare, rating and plan selection will be supported by the partner websites using their own tools. HHS would provide Web Brokers a Public Use File (PUF) including information of QHPs to use as part of the plan shopping experience on their web sites.

9.    For a consumer shopping directly on the partner website, the consumers will be required to maintain two accounts (User ID and Password), one on the partner website and the second on the FFM. Every time a consumer is transferred to the FFM, they would need to sign-in with their FFE User ID and Password. For a consumer shopping indirectly via a broker or agent, the consumer may have an FFM user ID and password (if they previously registered with the FFM), but is not required to have FFM web credentials.

10.    The partner website will send the Information Exchange System ID (assigned by the DSH during onboarding of the partner) as part of all requests to the FFM (Transfer to the FFM as well as Web Service calls).

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11. The partner website will assign a unique Partner Assigned Consumer ID for each consumer and send that as part of all requests to the FFM API. The FFM will in turn assign an FFE Assigned Consumer ID and send to the partner website (along with the Partner Assigned Consumer ID) when the consumer is transferred back to the partner website.

12. The partner website will send the FFE Assigned Consumer ID in all web service requests to the FFM.

13. For the direct enrollment interaction model, when the consumer completes the eligibility workflow on the FFM website, the FFM will transfer the consumer back to the return URL provided by the partner website as part of the transfer to the FFM. The consumer will also be returned to the same URL in cases of exceptions such as failure to create an account, failed Remote Identity Proofing (RIDP) or inability to provide information required for eligibility determination. An exception code will be returned to the partner website to indicate the type of exception.

14. For the lead generation interaction model, when the consumer completes the plan shopping workflow on the FFM, the FFM will transfer the consumer back to the return URL provided by the partner website as part of the transfer to the FFM.

15. FFM will send all notices relating to eligibility directly to the consumer.

16. If a verification issue results during the application process, the FFM will interact directly with the consumer (notices/other forms of contact) to resolve the issue.

17. All consumer appeals will be handled by the FFM with the consumer directly interacting with the FFM Appeals process.

18. The Direct Enrollment API will not support enrollments into catastrophic plans. Consumers seeking to enroll one or more members of their household in a catastrophic plan would need to enroll directly on the FFM.

# 3. API Interaction Model

## 3.1. System Context

The FFM APIs for partner websites will support two types of interactions:

- Secure Transfer of Consumer to the FFM and Back - the consumer would be transferred to the FFM website to complete the eligibility workflow and then returned to the partner website

- Web Services - the partner website will invoke one or more web services exposed by the FFM

Figure 2 - FFM API Consumer Interaction Model illustrates the interactions of the consumer with the FFM and the partner website and also the interactions of the partner website with the FFM through the DSH.

**Figure 2 - FFM API Consumer Interaction Model**
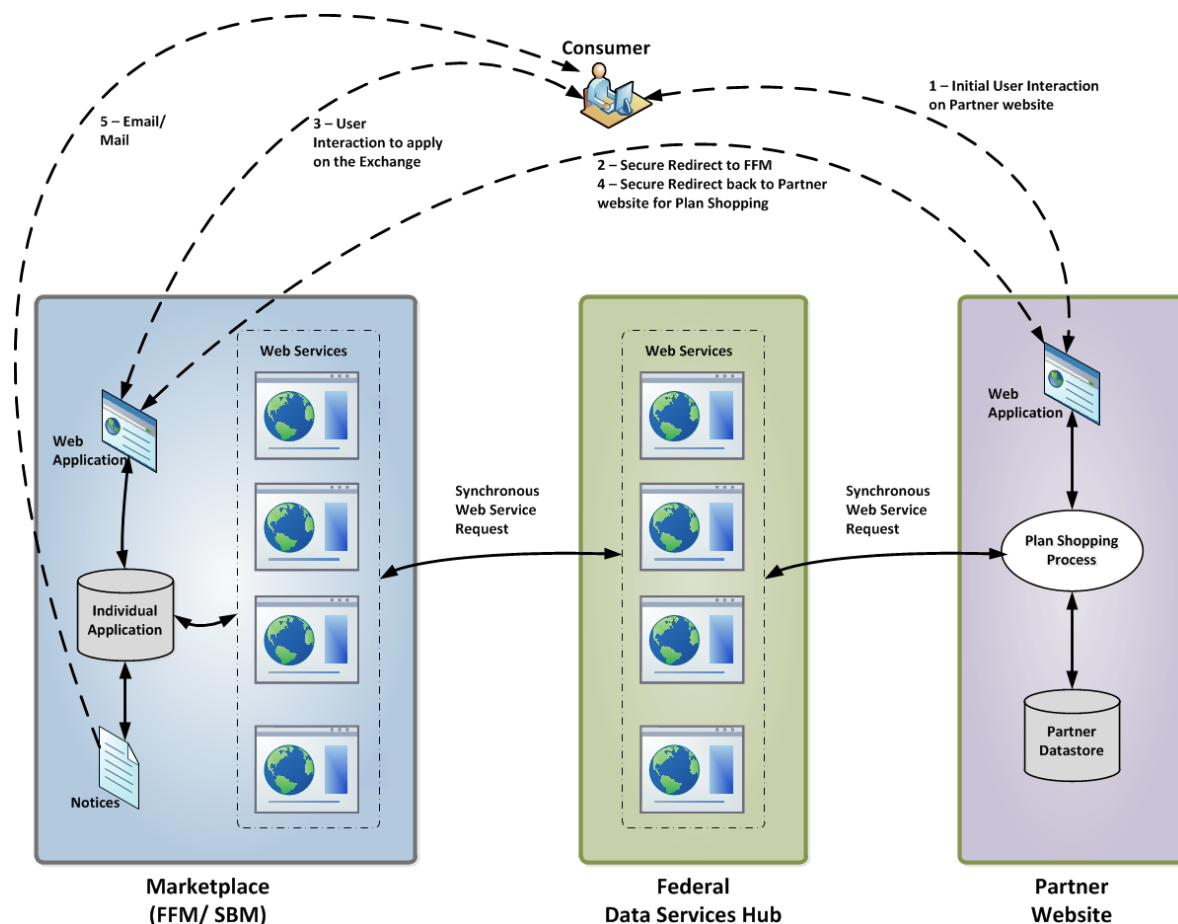


The Secure Transfer interactions will occur directly between the FFM and the partner website. The return URL would be sent by the partner website as part of the transfer request to the FFM and will be used by the FFM to navigate the consumer back after they complete their tasks on the FFM. The FFM will send any notifications related to eligibility determination directly to the

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consumer via online notifications or mail. The partner website will be able to retrieve the eligibility information by invoking an FFM Web Service.

The web services interactions between the FFM and partner websites will be routed through the Federal Data Services Hub (DSH). The FFM will manage the business process aspects of the web services and expose coarse grained business services that can be consumed by partner websites. The DSH will host the web services end points for all the FFM web services. The DSH will manage Trading Partner Agreements including onboarding of these partners. The DSH will also manage the security aspects of the web services.

All FFM web services will employ a standard Web Service Header that includes identifying information for the transaction with a custom payload for each type of transaction supported. The DSH will pass through the requests and responses by invoking the corresponding FFM services. The DSH will perform minimal inspection/actions and focusing on the authentication, auditing and monitoring functions of the interactions.

## 3.2. User Types Supported

The Direct Enrollment API and the Lead Generation Model are intended to support Consumers, Agents and Brokers who shop for and enroll into QHPs through a partner website. Since the interaction model includes UI Integration these users need to be registered on both the FFM as well as the partner website. This section describes the registration requirements for these users.

### 3.2.1. Consumers

### 3.2.1.1. Registration

This process applies to a consumer on the Individual Market trying to complete their plan shopping and enrollment activities through a partner website.

On the FFM, consumers would be registered similar to any consumer that directly accesses the FFM. The consumer would have to go through the CMS Enterprise Identity Management (EIDM) workflow that includes Remote Identity Proofing (RIDP) and setup of a User ID and password. Other requirements include setting up Security Questions (for Password Resets) as well as Assister Authorization Questions (similar to security questions, except these will be used to confirm the consumer's authorization for an Agent or Broker to work on their behalf). The same consumer credentials on the FFM apply regardless of whether the consumer accesses the FFM directly or through a partner website.

Partner websites have the choice of registering new consumers before redirecting them to the FFM or perform this function when they return from the FFM. With either model, duplicate data entry by consumer can be minimized by using contact information captured by one system being passed on to the other. Since, the partner website would be handling and presenting sensitive personal information received from the FFM via web services, the partner website's registration process would need to comply with Security standards provided by CMS. More details on this will be included in a future version of this document.

### 3.2.1.2. System Access and Workflow

Consumers registered with a partner website need to login to the partner website prior to accessing information from the FFM, either via redirect or behind the scenes via web services. Depending on the consumer's application status, they may need to be redirected to the FFM or continue on the partner website. If a consumer has not completed their application for eligibility

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determination or has returned to report a change in circumstance, the consumer would be redirected to the FFM to complete that process. In those situations, on reaching the FFM, the consumer would need to login using their FFM credentials. In all other interactions, the consumer would stay entirely on the partner website. The partner website would obtain the current eligibility status of the consumer's household from the FFM using a web service call and guide the consumer through the plan shopping or enrollment process on their website.

Consumers already registered with the FFM, directly or through a partner website, who try to access the FFM through a different partner website would need to be redirected to the FFM and Login with their FFM credentials to establish the link between their FFM application and their partner website account. These consumers can be registered either prior to accessing the FFM or after they return from the FFM. As part of establishing the link, the partner website and the FFM would exchange their respective identifiers for the consumer (Partner Assigned Consumer ID and FFE Assigned Consumer ID) to be used in all subsequent interactions.

## 3.2.2. Agents and Brokers

### 3.2.2.1.    Registration

This process applies to Agents and Brokers supporting consumers in the Individual Market. A pre-requisite for these users (based on current policy) is that they should be licensed Agents or Brokers appointed by the Issuer with whom they are enrolling their customer. Users under this category would need to register with the FFM and satisfy the requirements of NIST Level 3 authentication requirements. This process would include Remote Identity proofing, completion of training and certification before the account is activated. These users will also need to be registered by the partner website through which they access the FFM. As part of their registration, the partner website would need to validate licensure and appointment information of the agent or broker.

### 3.2.2.2.    System Access and Workflow

Agents and Brokers will start at a partner website and be redirected to the FFM for completing the application for eligibility determination for their consumer. On the FFM, they would land on an Agent/Broker home page where they can look up their consumer, if they already exist on the FFM or start a new application for the consumer for new FFM consumers. Depending on the final security model, there may be a need for the Agents and Brokers to login to the FFM using their FFM credentials when they are redirected to the FFM (final details will be provided in a future version of the document). When an Agent of Broker tries to look up an existing FFM consumer, they would need to provide responses (obtained from the consumer) to Assister Authorization Questions for the FFM to validate that the Agent or Broker has the consumer's authorization to access their account. On successful authorization, the FFM will associate the Agent or Broker with the consumer. Once the association is established the Agent/ Broker will be able to access the consumers account till the consumer explicitly removes the association or associates with a different Agent or Broker. For new FFM consumers, the Agent or Broker would need to take the consumer through Remote Identity Proofing to establish the association.

Once an Agent or Broker has been associated with a consumer, they can register the consumer with the FFM (if not already registered on the FFM) and complete their application for eligibility. A key difference in this registration process from that of the consumer accessing the Partner Website/FFM is that logon credentials would not be established for the consumer. In

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such cases, the consumer will need to register with the FFM (if not already done) and the FFM will associate their Logon credentials with the application created by the Agent or Broker.

The eligibility determination workflow for Agents and Brokers will be similar to that of consumers. The Agent or Broker will be redirected back to the partner website when they complete the eligibility determination process. On the partner website Agents and Brokers will use the shopping and enrollment tools of that website. The submission of enrollment transaction to the FFM will be performed by the partner website using the FFM Enrollment Web Service.

# 4. API Interaction Scenarios

Interactions between the partner website and the FFM will occur in a variety of business scenarios related to the consumer's situation with a corresponding list of steps/activities performed at either end. The interactions may vary depending on the type of partner website (Web Broker or Issuer) invoking the API. It is to be noted that the same set of FFM API will be used in each of these scenarios. Details of FFM API supporting these interactions are included in *Section* 5 *API Interfaces*.

Table 1 lists various business scenarios in which the FFM API will be invoked by a partner website. The sequence of steps/activities for each scenario is included in *Appendix B - Key Interaction Scenarios*.

## Table 1 - API Interaction Scenarios

| Scenario | Scenario Description |
|---|---|
| ***Scenario #1a - New FFM Consumer:*** New FFM consumer through partner website for eligibility determination | 1. Consumer and/or applicants are not enrolled in a QHP<br>2. Consumer starts shopping for health insurance at the partner website and requests to enroll in a QHP (with or without financial assistance)<br>3. The partner website transfers the consumer to the FFM website for eligibility determination<br>4. After completion of eligibility determination by the FFM, consumer is transferred back to the partner website for comparing plans and selecting/enrolling in a plan<br>5. On completion of plan selection, the partner website will call a FFM web service to submit the enrollment request |
| ***Scenario #1b - New FFM Consumer (Agent/Broker Initiated Direct Enrollment):*** New FFM consumer through partner website for eligibility determination  with assistance of an agent/broker | 1. Consumer and/or applicants may or may not be enrolled in a QHP (the scenario example, steps through when the consumer and/or applicants are not enrolled in a QHP)<br>2. Consumer starts shopping for health insurance at the partner website via an agent/broker and requests to enroll in a QHP (with or without financial assistance)<br>3. The partner website transfers the agent/broker to the FFM website for eligibility determination of the consumer<br>4. After completion of eligibility determination by the FFM, agent/broker is transferred back to the partner website for comparing plans and selecting/enrolling in a plan<br>5. On completion of plan selection, the partner website will call a FFM web service to submit the enrollment request |

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| Scenario | Scenario Description |
|---|---|
| ***Scenario #1c - New FFM Consumer (Consumer initiated lead** generation)**:* New FFM consumer through partner website for eligibility determination (lead generation) | 1. Consumer and/or applicants may or may not be enrolled in a QHP (the scenario example, steps through when the consumer and/or applicants are not enrolled in a QHP)<br>2. Consumer starts shopping for health insurance at the partner website and requests to enroll in a QHP (with or without financial assistance)<br>3. The partner website transfers the consumer to the FFM website for eligibility determination<br>4. After completion of eligibility determination by the FFM, FFM guides the consumer through comparing plans and selecting/enrolling in a plan (partner may have supplied a default filter for the plan results)<br>5. On completion of plan selection, FFM processes the enrollment selection and will transfer the consumer back to the partner website if a return URL is supplied and if the consumer wishes to do so. |
| ***Scenario #2 - Returning FFM Consumer**:* Existing FFE consumer returning through partner website for eligibility determination. | 1. Consumer and/or applicants are not enrolled in a QHP<br>2. During a prior session consumer started shopping for health insurance at the partner website and requested to enroll in a QHP. Consumer was transferred to the FFE for eligibility determination but did not complete the eligibility determination process. This process also applies to consumers who started shopping at the FFE and decided to go a partner website or those who started at one partner website and subsequently moved to a different partner website.<br>3. Consumer is now returning to continue the application for eligibility determination and shopping for health coverage<br>4. The partner website transfers the consumer to the FFE website for eligibility determination<br>5. After completion of eligibility determination by the FFE, consumer is transferred back to the partner website for comparing plans and selecting/enrolling in a plan<br>6. On completion of plan selection, the partner website will call a FFE web service to submit the enrollment request |
| ***Scenario #3 - Reporting Changes Impacting** Eligibility:* Existing FFM consumer returning through partner website to report changes that impact eligibility | 1. Consumer and/or applicants are enrolled in a QHP on the exchange<br>2. Consumer is now reporting changes such as:<br>&bull; Household income<br>&bull; Membership (add or remove members)<br>&bull; Residency<br>&bull; Demographic information (for one or more members)<br>3. The change impacts their eligibility for financial assistance and may also require/allow the consumer to change QHPs |
| ***Scenario #4 - Reporting changes not impacting eligibility:*** Existing FFM consumer returning through partner website to report changes that do not impact eligibility | 1. Consumer and/or applicants are enrolled in a QHP on the exchange<br>2. Consumer is now reporting changes such as:<br>&bull; Household income<br>&bull; Demographic information (for one or more members)<br>&bull; Residency<br>3. The change does not impact their eligibility for financial assistance and does not require/allow the consumer to change QHPs |

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| Scenario | Scenario Description |
|---|---|
| ***Scenario #5 - Reporting changes leading to Disenrollment:*** Existing FFM consumer returning through partner website to report changes that lead to Disenrollment | 1. Consumer and/or applicants are enrolled in a QHP on the exchange through a previous interaction from the partner website<br>2. Consumer is now reporting changes to their household information<br>3. One or more members of the consumer's household lose eligibility for QHP or APTC/CSR due to one or more of the following and may be subject to auto disenrollment unless the consumer takes action:<br>&bull; Change in lawful presence status<br>&bull; Change in residency status<br>&bull; Change in incarceration status<br>&bull; Change in household income<br>&bull; Gained employer sponsored health coverage<br>&bull; Gained eligibility for other public assistance for health coverage (Medicaid, CHIP, Medicare etc.)<br>4. Consumer may choose to continue QHP enrollment for impacted members without APTC/CSR or voluntarily terminate QHP enrollment for them. The exception to this is loss of eligibility for QHP, in which case the members impacted will always be disenrolled by the FFM<br>_**Note:**_ Disenrollment transactions can be performed only from a partner website associated with the issuer of the QHP policy. |
| ***Scenario #6 - FFM Initiated Disenrollment:*** Disenrollment initiated by FFM due to other events. | 1. Consumer and/or applicants are enrolled in a QHP on the exchange through a previous interaction from the partner website<br>2. FFM re-determines eligibility for APTC/CSR due to one of the following<br>&bull; Expiry of period of reasonable opportunity to resolve a verification issue<br>&bull; Periodic data match<br>3. One or more members of the consumer's household lose eligibility for APTC/CSR due to one of the following and may be subject to auto disenrollment unless the consumer takes action:<br>&bull; Lost eligibility for APTC/CSR due to unresolved inconsistencies<br>&bull; Lost eligibility based on new information obtained through periodic data match<br>&bull; Gained eligibility for other public assistance for health coverage (Medicaid, CHIP, Medicare etc.)<br>4. Consumer may choose to continue QHP enrollment for impacted members without APTC/CSR or voluntarily terminate QHP enrollment for them.<br>_**Note:**_ Disenrollment transactions can be performed only from a partner website associated with the issuer of the QHP policy. |
| ***Scenario #7 - Voluntary Disenrollment by Consumer:*** Voluntary Disenrollment by FFM consumer through partner website | 1. Consumer and/or applicants are enrolled in a QHP on the exchange through a previous interaction from the partner website<br>2. Consumer is voluntarily disenrolling from the QHP.<br>_**Note:**_ Disenrollment transactions can be performed only from a partner website associated with the issuer of the QHP policy. |

# 5. API Interfaces

This section provides a list of all Interfaces supported by the FFM API to facilitate consumer interactions through partner websites.

*Section 5.1- List of API Interfaces - UI Integration* lists the Interfaces supported by the FFM API to support the secure transfer of a consumer to the FFM website and back to the partner website. The information structure (data elements) for the request and response for each of these interfaces is included in Section 6.3 - UI Integration Specification. The UI integration interfaces will be utilized by partner websites implementing the Direct Enrollment API as well as those implementing the Lead Generation Model.

*Section 5.2 - List of Interfaces - Web Services* lists the web services exposed by the FFM API to the partner website to support plan shopping, selection and submission of enrollment information. The information structure (data elements) for the request and response for each of these web services is included in Section 7.3 - Web Service Specifications. The Web Services interfaces are applicable to partner websites using the Direct Enrollment API only.

## 5.1. List of API Interfaces - UI Integration

Table 2 provides a list of API interfaces for UI integration.

**Table 2 - List of API Interfaces**

| Interface Identifier | Interface Name | Description |
|---|---|---|
| HTTP.WB.FFE.01 | Transfer Consumer to FFM | This interface will facilitate secure transfer of the consumer from the Partner Website to the FFM to complete the application for eligibility or for reporting changes in circumstances. This interaction will also establish a link between the consumer's accounts on the Partner Website and the FFM. |
| HTTP.FFE.WB.01 | Transfer Consumer back to Web Broker/Issuer | This interface will facilitate secure transfer of the consumer back to the Partner Website from the FFM. The interface will be used in the following contexts:<br>• Completed Eligibility Application<br>• Voluntary return by consumer to partner website<br>• Return to partner website due to an exception<br>The FFM will transfer the consumer to a Return URL provided by the partner website while transferring the consumer to the FFM. |

## 5.2. List of Interfaces - Web Services

Table 3 provides a list of API interfaces for web services.

**Table 3 - List of API Interfaces**

| Interface Identifier | Interface | Description |
|---|---|---|
| WS.WB.FFE.01 | Fetch Household/ Eligibility Details | Returns details of all applicants in the household requesting coverage along with their eligibility for financial assistance. Information returned will include:<br>• Household contact information<br>• List of household members that are applicants and their demographic/ eligibility information. Eligibility information would include details on the members eligibility for Medicaid, CHIP, Premium Tax Credits and CSR<br>• Enrollment information for the household. |
| WS.WB.FFE.02 | Submit Enrollment/ Change/ Disenrollment Transaction | Process a new enrollment, an enrollment change or termination/cancellation of an enrollment. This service will accept and process the submitted request. Processed requests will be transmitted to the Issuer as x12-834 enrollment transactions. |

# 6. User Interface Integration

## 6.1. Overview

As described in earlier sections, the Partner Websites will need to redirect the end-user (consumer or agent/broker) securely to the FFM Website to conduct eligibility determination. At the end of the eligibility determination, the end-user will be redirected back to the Partner Site where the end-user can continue shopping and ultimately enroll.

This section and following subsections describe in detail how the following two transfers will be conducted:

- HTTP.WB.FFE.01 - Secure Inbound Redirect from Partner Website to FFM

- HTTP.FFE.WB.01 - Secure Outbound Redirect from FFM to Partner Website

Please note that several information parameters will be securely transferred between the Partner site and FFM and vice versa using HTTP POST during each of the redirects. These parameters are outlined in detail in sections 6.3.1.1 and 6.3.2.1 respectively. In addition, SAML2 HTTP POST Binding (a W3C standard) will be used to secure and maintain the integrity of the information during these transfers. Further details on the security considerations and the SAML2 assertions are also provided in the sections below.

## 6.2. Technical Implementation

### 6.2.1. Connectivity Pre-requisites

Before any partner website can interact with the FFM, the partner website would need to complete onboarding requirements with the Federal Data Services Hub (DSH). The companion document titled "Federal Data Services Hub (DSH) - Requester Onboarding Summary Document" outlines the protocol for interacting with the DSH including onboarding requirements.

The partner website would also need to comply with security requirements governing access to Federal Systems. This would include signing a Data Use Agreement with CMS to become an official partner.

### 6.2.2. Secure Transfer of Consumer between FFM and Partner Sites

Based on the item # 1 in *Section* 2 *- Key Considerations*, a user coming to the Partner Website needs to be transferred to the FFM website securely for eligibility determination purposes. Once the user completes their function on the FFM website they would be securely transferred back to the partner website.

To achieve this secure transfer, the following security considerations and corresponding provisions are proposed to be put in place for inbound transfer to the FFM and outbound transfer back to the partner website.

## 6.2.2.1. Securing Inbound Redirect from Partner Website to FFM (HTTP.WB.FFE.01)

Table 4 provides an overview of the security considerations and provisions required to secure the inbound http re-direct from Partner Website to FFM.

**Table 4 - HTTP.WB.FFE.01 Security Considerations**

| Security Consideration | Security Provision | Additional Notes |
|---|---|---|
| • Protect any data being transferred from Partner site to FFM Website<br>• Ensure that the user is being transferred to the authentic FFM Website | • Leverage HTTPS protocol to transfer the user from the partner website to the FFM website | |
| • FFM needs to authenticate and validate that the secure transfer request is coming from an authorized partner website<br>• FFM needs to securely receive parameters from the partner website related to the end-user and their purpose (eligibility, attestation, etc.) and make sure their integrity is not compromised | • The partner website sends a SAML 2 assertion using HTTP POST binding that contains the Information Exchange System ID issued to them during the onboarding process and a series of attributes related to the user and their purpose<br>• FFM validates the SAML assertion is from a trusted partner and accepts the secure inbound transfer. | • More details on what the SAML 2 assertion should contain are included in section 6.3.1 below.<br>• SAML 2 HTTP post binding provides a standards compliant way to authenticate the partner website as well as securely receive additional attributes in an extensible way. This is achieved by validating the digital signature of the SAML 2 assertion. |

## 6.2.2.2. Securing Outbound HTTP Redirect from FFM to Partner Site (HTTP.FFE.WB.01)

Table 5 provides an overview of the security considerations and provisions required to secure the inbound http re-direct from Partner Website to FFM.

**Table 5 - HTTP.FFE.WB.01 Security Considerations**

| Security Consideration | Security Provision | Additional Notes |
|---|---|---|
| • Protect any data being transferred from FFM Website site to the Partner site - specifically the FFM Assigned Consumer to be used for subsequent web service requests | • Leverage HTTPS protocol to transfer the user from FFM site to the Partner Site<br>• On completion of application submission or another event necessitating return of the consumer to the partner website, FFM will re-direct the consumer to a Return URL for the Partner Website that was sent to the FFM as part of transferring the consumer to the FFM. | • The Return URL will be included in the transfer to the FFM from the partner website. |

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| Security Consideration | Security Provision | Additional Notes |
|---|---|---|
| • The Partner site needs to validate that the http redirect is coming from the FFM website<br>• FFM needs to securely deliver parameters to the Partner site and make sure that the integrity is not compromised | • FFM sends a SAML 2 assertion using the HTTP POST binding that contains the FFE Assigned Consumer ID that the Partner site can use for subsequent web service access<br>• The Partner site validates the SAML assertion is from FFM and accepts the http redirect. | • More details on what the SAML 2 assertions should contain are listed in section 6.3.2 below.<br>• SAML 2 HTTP post binding provides a standards compliant way to authenticate FFM as well as securely receive additional attributes in an extensible way. |

## 6.2.3. Web Services Interaction between Partner Site and FFM

Please refer to the companion document "Federal Data Services Hub (DSH) - Requester Onboarding Summary Document" for information on web services interactions with the FFM.

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## 6.3.  UI Integration Specification

### 6.3.1. Transfer User from Partner Website to FFM (HTTP.WB.FFE.01)

This secure transfer interface will transfer the user (the consumer or the agent/broker) from the Partner Website to the FFM for account creation and eligibility determination. This will establish a link between the consumer's accounts on the Partner Website and the FFM. The same transfer mechanism will be used by Partner websites using the Direct Enrollment API as well as those using the Lead Generation model.  The transfers for the lead generation model will require additional fields listed in the table below to apply appropriate filters for the consumer.

### 6.3.1.1.  Transfer User from Partner Website to FFM (HTTP.WB.FFE.01) - Request

Table 6 provides the data elements for the request from a partner website to transfer a user to the FFM.

**Table 6 - Transfer User from Partner Website to FFM - Request**

| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| *SAML Protocol Response* | | | | | | |
| | saml2p:Response format | R | urn:oasis:names:tc:SAML:2.0:protocol SAML Protocol Response for HTTP post binding | String | saml2p: Response format | |
| | saml2p:StatusCode format | R | urn:oasis:names:tc:SAML:2.0:status:Success Contains Success or Failure | String | saml2p: StatusCode format | |
| *SAML Core Attributes* | | | | | | |
| | SAML2:NameID format urn:oasis:names:tc:SAML:1.1:nameid-format:unspecified | R | This should be the Information Exchange System ID issued to the partner website during the Data Services Hub onboarding process | String | | |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| **Transfer Consumer from Partner Website to FFM (HTTP.WB.FFE.01) - Request** |
| | SAML2: SubjectConfirmation Method | R | urn:oasis:names:tc:SAML:2.0:cm:sender-vouches | String | | |
| | ds:Signature | R | Digital Signature of the SAML Assertion that includes the Partner's Public Key | XML Digital Signature | | |
| SAML Extended Attributes | | | | | | |
| *Consumer Identifiers* | | | | | | |
| | State Exchange Code | R | Code indicating the specific state instance of the FFM on which the consumer will submit the application/ changes. 2 Character State Abbreviation followed by a digit. The last position will always be '0'. | String | 3 | 3 |
| | Partner Assigned Consumer ID | R | Unique Identifier assigned by Partner Website for the consumer for interactions with the FFM. | String | 1 | 32 |
| | FFE Assigned Consumer ID | C | Unique Identifier assigned by the FFM for the consumer's eligibility determination interaction with the FFM. Required to indicate a returning user. | String | 1 | 32 |
| *Transfer Information* | | | | | | |
| | User Type | R | Type of the user logged on to the partner website Consumer Partner Call Center Rep Agent Broker | String | 1 | 18 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | FFE User ID | C | User ID of the current user on the FFM. Only applicable when User Type is Partner Call Center Rep, Agent or Broker. | String | 1 | 50 |
| | Transfer Type | R | Direct Enrollment or Lead Generation<br><br>Direct Enrollment - the FFM will redirect the user back to the Partner website after the eligibility determination to continue plan shopping on the Partner website.<br><br>Lead Generation - the FFM will redirect the user back to the Partner website after plan shopping/ enrollment. | String | 1 | 18 |
| | Return URL | C | Partner Website URL to which the current user will be securely transferred back after their interaction with the FFM.<br>Required for Transfer Type of direct enrollment, optional for lead generation. | String | 1 | 100 |
| | Keep Alive URL | O | Partner Website URL which the FFM will periodically ping to prevent the current user's session on the partner website from expiring. | String | 1 | 100 |
| *Lead Generation* | | | Additional attributes to facilitate plan shopping and enrollment submission in the lead generation process model where the applicant will remain on the FFM for plan shopping. | | | |

*Transfer Consumer from Partner Website to FFM (HTTP.WB.FFE.01) - Request*

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | NPN | O | National Producer Number to be associated with any enrollments submitted as part of the current transfer session.<br><br>Optional if Transfer Type is Lead Generation.<br>Not applicable for direct enrollment since the NPN to be submitted with the enrollment transaction will be passed as part of the enrollment submission to FFM via the web service. | Number | 1 | 10 |
| | Plan Results Filter | O | A list of up to 10 Issuer/ QHP IDs for the FFM to filter plan results by. The IDs will need to be specified as a comma separated list.<br><br>Note: The consumer will still have the ability to reset the filter if they wish view all plans available on the FFM. | String | 1 | 200 |
| **Contact Information** (Optional. Applicable only for New Consumer) | | | | | | |
| *Contact Name* | | | Optional contact name information collected by the partner that can be used to pre-populate the registration form for a new consumer. | | | |
| | First Name | O | First name of the contact person | String | 1 | 50 |
| | Middle Name | O | Middle name of the contact person | String | 1 | 50 |
| | Last Name | O | Last name of the contact person | String | 1 | 50 |
| | Suffix Name | O | Suffix of the contact person:<br>Jr.<br>Sr.<br>II<br>III<br>IV | String | 1 | 18 |

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| | Transfer Consumer from Partner Website to FFM (HTTP.WB.FFE.01) - Request | | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| *Contact Person Address* | | | Optional address information collected by the partner that can be used to pre-populate the registration form for a new consumer. | | | |
| | Street Name 1 | O | Street address | String | 5 | 75 |
| | Street Name 2 | O | Apt/suite/etc. number | String | 5 | 75 |
| | City Name | O | Name of City | String | 5 | 100 |
| | State | O | State Code | String | 2 | 2 |
| | Zip Code | O | Zip Code | String | 5 | 9 |
| *Demographic Information* | | | Optional demographic information collected by the partner that can be used to pre-populate the registration form for a new consumer. | | | |
| | SSN | O | Social Security Number of the contact person.<br>Must be 9 digits, numeric.  First digit cannot be 0.  First three digits cannot be between 900 and 999.  All digits may not be the same.  4th and 5th and last 4 digits cannot be zeroes. | String | 9 | 9 |
| | Birth Date | O | Date of Birth of contact person<br>Must be a valid date, year must be > 1912 and <= current year.  Entered in YYYY-MM-DD format.  Cannot be greater than current date. | Date | 10 | 32 |
| | Email Address | O | Email address of the contact person. | String | 1 | 100 |
| | Phone Number | O | Primary phone number of the contact person. | String | 10 | 10 |

## Sample – SAML Protocol Responses

For the sample, User Type is Consumer and Transfer Type is Direct Enrollment.

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```
<?xml version="1.0" encoding="UTF-8"?>
<saml2p:Response ID="413be1b7-ac2d-4324-a359-998935f11a66"
    IssueInstant="2013-04-12T15:43:42.389Z" Version="2.0"
    xmlns:saml2p="urn:oasis:names:tc:SAML:2.0:protocol">
    <saml2p:Status>
        <saml2p:StatusCode Value="urn:oasis:names:tc:SAML:2.0:status:Success" />
    </saml2p:Status>
```

**SAML Protocol Response Format**

```
<saml2:Assertion Version="2.0" ID="SamlAssertion-25171a8736ed098dde8659e5ba250b5f"
IssueInstant="2013-04-19T20:16:07.090Z"
xmlns:saml2="urn:oasis:names:tc:SAML:2.0:assertion"><saml2:Issuer
Format="urn:oasis:names:tc:SAML:1.1:nameid-format:unspecified">ffx-ffe-w7-
15.cgifederal.com</saml2:Issuer><ds:Signature
```

**Entity ID of the partner website as issued by the HUB**

```
xmlns:ds="http://www.w3.org/2000/09/xmldsig#"><ds:SignedInfo><ds:CanonicalizationMethod
Algorithm="http://www.w3.org/2001/10/xml-exc-c14n#"/><ds:SignatureMethod
Algorithm="http://www.w3.org/2000/09/xmldsig#rsa-sha1"/><ds:Reference URI="#SamlAssertion-
25171a8736ed098dde8659e5ba250b5f"><ds:Transforms><ds:Transform
Algorithm="http://www.w3.org/2000/09/xmldsig#enveloped-signature"/><ds:Transform
Algorithm="http://www.w3.org/2001/10/xml-exc-c14n#"/></ds:Transforms><ds:DigestMethod
Algorithm="http://www.w3.org/2000/09/xmldsig#sha1"/><ds:DigestValue>VLIECSLwNnRpczRvII
UcGuospVk=</ds:DigestValue></ds:Reference></ds:SignedInfo><ds:SignatureValue>m3nxFPAcB
XJ+EgrI6FrTYGWL9n8o9HtxkG4Dzsp8lNGYNSle/+FmLvkwbvzMgcbhNuJv86GcAGOZfVNEP3
acP/Eg9at2jf/HaEn50vVgq4jl40BGWsGWdq97x2IlBzBtMv5aOxWnrx2hZmiDs8uQVK+P5YUpCP
Zxo3ki3NdxL7et7wTRas27XgZei2oVn8lxHsiNoBkS5DDBdCBxOOOvrxHmpAw38J6+uQ8w9Kuf
OZKJwXpt8EKhi1dqje6t/s3jY3yYPQird9NXRiXU8uKnQEki/11/zOoBrcrlXl9isF7JB6NkgWp+6Va
Rapjik3JPJ/PLA/PRS48H8xpJnZvthA==</ds:SignatureValue><KeyInfo
```

**Digital Signature of the SAML Assertion that includes the Partner's Public Key**

```
xmlns="http://www.w3.org/2000/09/xmldsig#"><X509Data><X509SubjectName>CN=ffx-ffe-w7-
15.cgifederal.com,OU=ffx,OU=ffe,O=cgifederal,L=Herndon,ST=VA,C=US</X509SubjectName>
```

**X509 Certificate of the partner**

```
<X509Certificate>MIIDqTCCApGgAwIBAgIERfXhazANBgkqhkiG9w0BAQsFADCBhDELMAk
GA1UEBhMCVVMxCzAJBgNVBAgTAlZBMRAwDgYDVQQHEwdIZXJuZG9uMRMwEQYDV
QQKEwpjZ2lmZWRlcmFsMQwwCgYDVQQLEwNmZmUxDDAKBgNVBAsTA2ZmeDElMCMG
A1UEAxMcZmZ4LWZmZS13Ny0xNS5jZ2lmZWRlcmFsLmNvbTAeFw0xMzA0MTgxODA0NDh
aFw0yMzAyMjUxODA0NDhaMIGEMQswCQYDVQQGEwJVUzELMAkGA1UECBMCVkExED
AOBgNVBAcTB0hlcm5kb24xEzARBgNVBAoTCmNnaWZlZGVyYWwxDDAKBgNVBAsTA2Z
mZTEMMAoGA1UECxMDZmZ4MSUwIwYDVQQDExxmZngtZmZlLXc3LTE1LmNnaWZlZGV
yYWwuY29tMIIBIjANBgkqhkiG9w0BAQEFAAOCAQ8AMIIBCgKCAQEAuXiXhbS4Nb9nIKAx
C5rsUk/bivpvsCcc4QQbqNG+CFFIPnZi1QUAOmUm7cm/Pcn2nvmXf6PTLfi3sVgrpxfsN/3TpCKx
```

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YTN87fKbE0fQLLmLjVFu6pUsU7ZsAcKb66/PynkoweUbBhAMgR1h3Q01SnEcN6eD0D751O72
0YlV/pcZFzTdAjU2H2EFRAUxO395+/iMCkm9iD+Plb84hy3HhBqJUuMr2KlCDgkLHYbkfUWZa
bbNKkZWp51q+5oeRCKXhCYjWQGbwxfQeo0ODV95IJdWryFJB8E5CVkwHbo7guNh5BAzNGt
Yix0VrKJkvXd/l0CRi8d5yyeR56bdhSoOGQIDAQABoyEwHzAdBgNVHQ4EFgQUeda/7pq6i+1iR
vGKMnJuP0FeX/kwDQYJKoZIhvcNAQELBQADggEBABn2/003wPonfGX+gAjSaQCdtnqs0FAZ
Cc7NLEE3tJSmmhHF2Mr45PkiA01fsxTqV9rrdfyIu7Jtl0Y3/rVLBuZyUftAWxpAZyFT68Nw0/Kzc
1NyyM3TN6eYRSvfOZHBlrwKCG1iExqmG3ucQtarEJvY/It6PMdWb3WLqLzD//2JbIIjz9Sq87TkS
PvFyDzrS7OlmeOgfOHV6yVjXDzB9XPRMHm9bo0qJZG1apI2M6Sph0imG8Wo/fmYs1hWdMr9z
5uTvB9g5ALL/AQOvwJBvdVo+qszOAy2wv4uuy0eIoJRMYO7KHEaUqRc5kbeKwrw4I2hUysIQ
wnxZ5L0MaTpo8Q=</X509Certificate></X509Data></KeyInfo></ds:Signature><saml2:Subject>

<saml2:NameID Format="urn:oasis:names:tc:SAML:1.1:nameid-format:unspecified"
NameQualifier="">test</saml2:NameID>

Name Id is the Exchange ID

<saml2:SubjectConfirmation Method="urn:oasis:names:tc:SAML:2.0:cm:sender-
vouches"><saml2:NameID>CN=ffx-ffe-w7-15.cgifederal.com, OU=ffx, OU=ffe, O=cgifederal,
L=Herndon, ST=VA, C=US</saml2:NameID></saml2:SubjectConfirmation></saml2:Subject>

Subject Confirmation Method
(in this case is Sender Vouches)

<saml2:Conditions NotBefore="2013-04-19T20:14:08.437Z" NotOnOrAfter="2013-04-
19T20:21:08.437Z"/>

SAML Expiration time

<saml2:AttributeStatement>

<saml2:Attribute Name="StateExchangeCode"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>MD0</saml2:AttributeValue></saml2:Attribute>

Consumer Identifiers

<saml2:Attribute Name="Partner Assigned Consumer ID"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>1234</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="FFE Assigned Consumer ID"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>6ad66f44-d7f3-4ec1-b832-
bb769749ff1c</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="User Type" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">

Transfer Information

<saml2:AttributeValue>Consumer</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="FFE User ID" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>john.doe@email.com</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Transfer Type" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">

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```
<saml2:AttributeValue>Direct Enrollment</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Return URL" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>https://www.bcbs.com/partnersite</saml2:AttributeValue></saml2:Attribute
>
<saml2:Attribute Name="Keep Alive URL" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>https://www.bcbs.com/extendsession.jsp</saml2:AttributeValue></saml2:At
tribute>
<saml2:Attribute Name="NPN" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue></saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Plan Results Filter"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>10270,10224</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="First Name" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>JOHN</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Middle Name" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>FISCHER</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Last Name" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>DOE</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Suffix Name" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue></saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Street Name 1" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>1234 Fishy LN</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Street Name 2" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>SUITE 124</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="City Name" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>PEORIA</saml2:AttributeValue></saml2:Attribute>
```

Contact Information

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```
<saml2:Attribute Name="State" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>IL</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Zip Code" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>20190</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="SSN" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>212-67-2191</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Date Of Birth" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>01/01/1951</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Email" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>john.doe@email.com</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Phone Number" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>531-321-2001</saml2:AttributeValue></saml2:Attribute>
</saml2:AttributeStatement>
<saml2:AuthnStatement AuthnInstant="2013-04-12T15:43:42.328Z"
        SessionIndex="session#1" SessionNotOnOrAfter="2013-04-12T15:43:42.328Z">
        <saml2:SubjectLocality Address="1234 Fishy LN, PEORIA, IL 20190"
            DNSName="2.175.111.190" />
        <saml2:AuthnContext>
            <saml2:AuthnContextClassRef>urn:oasis:names:tc:SAML:2.0:ac:classes:Password
            </saml2:AuthnContextClassRef>
        </saml2:AuthnContext>
    </saml2:AuthnStatement>
</saml2:Assertion>
</saml2p:Response>
```

Demographic Information

## 6.3.1.2.    Response

If the SAML assertion is invalid, then an error message will be displayed to the user.

Federally Facilitated Marketplace (FFM)

For Consumers, if the SAML assertion is valid, the user will be displayed the FFM Registration/Login Page. If the user has previously registered with the FFM, the user can login and they will be directed to last step in the eligibility application they were at during their prior interaction with the FFM. If they had previously completed the eligibility determination process, they will be taken to their My Account page. If the Consumer is new to the FFM, the Consumer can register with FFM to begin the application process.

For agents and brokers, if the SAML assertion is valid then the user will be displayed the FFM Login Page to login using their FFM credentials. Once logged in, the agent/broker will be directed to the Agent/Broker landing page to begin registration of the consumer with the FFM and to establish the consumer's consent to work on their behalf. If the agent/broker is returning to assist a consumer already associated with the, the partner website will pass the FFE Assigned Consumer ID as part of the transfer. This would allow the agent/broker to skip the consumer registration step since the FFM would be able to validate that the agent/broker is associated with the consumer.

## 6.3.2. Transfer User Back to Partner Website (HTTP.FFE.WB.01)

This HTTP redirect interface will transfer the user (the consumer or the agent/broker) from the FFM to the partner website after completion of the eligibility determination process. This interface will also be used in other situations such as on the user's intent to return or exceptions such as failure to create an FFM account due to failure in RIDP. The FFM will transfer the user to the Return URL provided by the partner website while transferring the user to the FFM. The same transfer mechanism will be used for users returning as part of the Direct Enrollment API as well as the Lead Generation Model. The difference between the transfers under these two models is that under the Direct Enrollment API, the consumer will be transferred back after eligibility determination, whereas in the case of Lead Generation, the consumer will be transferred back after they complete plan shopping/ enrollment.

## 6.3.2.1. Transfer User Back to Partner Website (HTTP.FFE.WB.01) - Request

Table 7 provides the data elements for the FFM request to transfer a user back to the partner website.

**Table 7 - Transfer User Back to Partner Website - Request**

| Transfer User Back to Partner Website (HTTP.FFE.WB.01) - Request | | | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| *SAML Protocol Response* | | | | | | |
| | saml2p:Response format | R | urn:oasis:names:tc:SAML:2.0:protocol SAML Protocol Response for HTTP post binding | String | | |
| | saml2p:StatusCode format | R | urn:oasis:names:tc:SAML:2.0:status:Success Contains Success or Failure | String | | |
| *SAML Core Attributes* | | | | | | |
| | SAML2:NameID format urn:oasis:names:tc:SAML:1.1:nameid-format:unspecified | R | FFM | String | 3 | 3 |

Federally Facilitated Marketplace (FFM)

| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | | | **Transfer User Back to Partner Website (HTTP.FFE.WB.01) - Request** | | | |
| | SAML2: SubjectConfirmation Method | R | urn:oasis:names:tc:SAML:2.0:cm:sender-vouches | String | | |
| | ds:Signature | R | Digital Signature of the SAML Assertion that includes the FFM's Public Key | XML Digital Signature | | |
| *Partner/ Consumer Identification* | | | | | | |
| | Information Exchange System ID | R | Unique Identifier assigned to the Partner Website by the Federal Data Services Hub as part of the on boarding process for the partner | String | 1 | 32 |
| | State Exchange Code | R | Code indicating the specific state instance of the FFM on which the consumer will submit the application/ changes. 2 Character State Abbreviation followed by a digit. The last position will always be '0'. | String | 3 | 3 |
| | Partner Assigned Consumer ID | R | Unique Identifier assigned by Partner Website for the consumer for interacting with the FFM. | String | 1 | 32 |
| | FFE Assigned Consumer ID | C | Unique Identifier assigned by the FFM for the consumer's eligibility determination interaction. | String | 1 | 32 |
| *Transfer Information* | | | | | | |

Federally Facilitated Marketplace (FFM)

| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| Transfer User Back to Partner Website (HTTP.FFE.WB.01) - Request |
| | User Type | R | Type of the user logged on to the partner website<br>• Consumer<br>• Partner Call Center Rep<br>• Agent<br>• Broker | String | 32 | 32 |
| | FFE User ID | C | User ID of the current user on the FFM<br>Only applicable when User Type is Partner Call Center Rep, Agent or Broker. | String | 1 | 50 |
| | Transfer Type | R | Type of Transfer to the FFM<br>• Completed Eligibility Application<br>• Exception on eligibility application<br>• User initiated return | String | 1 | 100 |
| | Exception Reason | C | Code indicating the type of exception that occurred on the FFM.<br>• Consumer failed Identity Proofing.<br>• Application in Pend Status.<br>• Application not completed.<br>• System Unavailable. Retry later.<br>• Data Sources Unavailable. Retry later.<br>Will be set when Transfer Type is 'Exception on eligibility application'. | String | | 100 |

## Sample – SAML Protocol Responses

For Sample 1, User Type is consumer and Transfer Type is Completed Eligibility Application.

<?xml version="1.0" encoding="UTF-8"?>

SAML Protocol Response

Federally Facilitated Marketplace (FFM)

```
<saml2p:Response ID="413be1b7-ac2d-4324-a359-998935f11a66"
    IssueInstant="2013-04-12T15:43:42.389Z" Version="2.0"
    xmlns:saml2p="urn:oasis:names:tc:SAML:2.0:protocol">
    <saml2p:Status>
        <saml2p:StatusCode Value="urn:oasis:names:tc:SAML:2.0:status:Success" />
    </saml2p:Status>
```

```
<saml2:Assertion Version="2.0" ID="SamlAssertion-25171a8736ed098dde8659e5ba250b5f"
IssueInstant="2013-04-19T20:16:07.090Z"
xmlns:saml2="urn:oasis:names:tc:SAML:2.0:assertion"><saml2:Issuer
Format="urn:oasis:names:tc:SAML:1.1:nameid-format:unspecified">ffx-ffe-w7-
15.cgifederal.com</saml2:Issuer><ds:Signature
xmlns:ds="http://www.w3.org/2000/09/xmldsig#"><ds:SignedInfo><ds:CanonicalizationMethod
Algorithm="http://www.w3.org/2001/10/xml-exc-c14n#"/><ds:SignatureMethod
Algorithm="http://www.w3.org/2000/09/xmldsig#rsa-sha1"/><ds:Reference URI="#SamlAssertion-
25171a8736ed098dde8659e5ba250b5f"><ds:Transforms><ds:Transform
Algorithm="http://www.w3.org/2000/09/xmldsig#enveloped-signature"/><ds:Transform
Algorithm="http://www.w3.org/2001/10/xml-exc-c14n#"/></ds:Transforms><ds:DigestMethod
Algorithm="http://www.w3.org/2000/09/xmldsig#sha1"/><ds:DigestValue>VLIECSLwNnRpczRvI
IUcGuospVk=</ds:DigestValue></ds:Reference></ds:SignedInfo><ds:SignatureValue>m3nxFPAc
BXJ+EgrI6FrTYGWL9n8o9HtxkG4Dzsp8lNGYNSle/+FmLvkwbvzMgcbhNuJv86GcAGOZfVNE
P3acP/Eg9at2jf/HaEn50vVgq4jl40BGWsGWdq97x2IlBzBtMv5aOxWnrx2hZmiDs8uQVK+P5YUp
CPZxo3ki3NdxL7et7wTRas27XgZei2oVn8lxHsiNoBkS5DDBdCBxOOOvrxHmpAw38J6+uQ8w9
KufOZKJwXpt8EKhi1dqje6t/s3jY3yYPQird9NXRiXU8uKnQEki/11/zOoBrcrlXl9isF7JB6NkgWp
+6VaRapjik3JPJ/PLA/PRS48H8xpJnZvthA==</ds:SignatureValue><KeyInfo
xmlns="http://www.w3.org/2000/09/xmldsig#"><X509Data><X509SubjectName>CN=ffx-ffe-w7-
15.cgifederal.com,OU=ffx,OU=ffe,O=cgifederal,L=Herndon,ST=VA,C=US</X509SubjectName>
<X509Certificate>MIIDqTCCApGgAwIBAgIERfXhazANBgkqhkiG9w0BAQsFADCBhDELMAk
GA1UEBhMCVVMxCzAJBgNVBAgTAlZBMRAwDgYDVQQHEwdIZXJuZG9uMRMwEQYDV
QQKEwpjZ2lmZWRlcmFsMQwwCgYDVQQLEwNmZmUxDDAKBgNVBAsTA2ZmeDElMCM
GA1UEAxMcZmZ4LWZmZS13Ny0xNS5jZ2lmZWRlcmFsLmNvbTAeFw0xMzA0MTgxODA0N
DhaFw0yMzAyMjUxODA0NDhaMIGEMQswCQYDVQQGEwJVUzELMAkGA1UECBMCVkEx
EDAOBgNVBAcTB0hlcm5kb24xEzARBgNVBAoTCmNnaWZlZGVyYWwxDDAKBgNVBAsT
A2ZmZTEMMAoGA1UECxMDZmZ4MSUwIwYDVQQDExxmZngtZmZlLXc3LTE1LmNnaWZl
ZGVyYWwuY29tMIIBIjANBgkqhkiG9w0BAQEFAAOCAQ8AMIIBCgKCAQEAuXiXhbS4Nb9n
IKAxC5rsUk/bivpvsCcc4QQbqNG+CFFIPnZi1QUAOmUm7cm/Pcn2nvmXf6PTLfi3sVgrpxfsN/3
TpCKxYTN87fKbE0fQLLmLjVFu6pUsU7ZsAcKb66/PynkoweUbBhAMgR1h3Q01SnEcN6eD0D
```

Entity ID of the FFE

Digital Signature of the SAML Assertion that includes the FFE's Public Key

X509 Certificate of FFE Public Key

Federally Facilitated Marketplace (FFM)

751O720YlV/pcZFzTdAjU2H2EFRAUxO395+/iMCkm9iD+Plb84hy3HhBqJUuMr2KlCDgkLHYb
kfUWZabbNKkZWp51q+5oeRCKXhCYjWQGbwxfQeo0ODV95IJdWryFJB8E5CVkwHbo7guNh
5BAzNGtYix0VrKJkvXd/l0CRi8d5yyeR56bdhSoOGQIDAQABoyEwHzAdBgNVHQ4EFgQUeda/
7pq6i+1iRvGKMnJuP0FeX/kwDQYJKoZIhvcNAQELBQADggEBABn2/003wPonfGX+gAjSaQC
dtnqs0FAZCc7NLEE3tJSmmhHF2Mr45PkiA01fsxTqV9rrdfyIu7Jtl0Y3/rVLBuZyUftAWxpAZyFT
68Nw0/Kzc1NyyM3TN6eYRSvfOZHBlrwKCG1iExqmG3ucQtarEJvY/It6PMdWb3WLqLzD//2JbI
Ijz9Sq87TkSPvFyDzrS7OlmeOgfOHV6yVjXDzB9XPRMHm9bo0qJZG1apI2M6Sph0imG8Wo/fm
Ys1hWdMr9z5uTvB9g5ALL/AQOvwJBvdVo+qszOAy2wv4uuy0eIoJRMYO7KHEaUqRc5kbeKw
rw4I2hUysIQwnxZ5L0MaTpo8Q=</X509Certificate></X509Data></KeyInfo></ds:Signature><sa
ml2:Subject>

<saml2:NameID Format="urn:oasis:names:tc:SAML:1.1:nameid-format:unspecified"
NameQualifier="">test</saml2:NameID>

Name ID

<saml2:SubjectConfirmation Method="urn:oasis:names:tc:SAML:2.0:cm:sender-
vouches"><saml2:NameID>CN=ffx-ffe-w7-15.cgifederal.com, OU=ffx, OU=ffe, O=cgifederal,
L=Herndon, ST=VA, C=US</saml2:NameID></saml2:SubjectConfirmation></saml2:Subject>

Subject Confirmation Method
(in this case is Sender Vouches)

<saml2:Conditions NotBefore="2013-04-19T20:14:08.437Z" NotOnOrAfter="2013-04-
19T20:21:08.437Z"/>

SAML Validation Condition

<saml2:AttributeStatement>
<saml2:Attribute Name="Information Exchange System ID"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>12121212</saml2:AttributeValue></saml2:Attribute>

Partner/Consumer identifier information

<saml2:Attribute Name="StateExchangeCode"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>MD0</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Partner Assigned Consumer ID"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>1234</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="FFE Assigned Consumer ID"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>6ad66f44-d7f3-4ec1-b832-
bb769749ff1c</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="User Type" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">

Transfer Information

<saml2:AttributeValue>Consumer</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="FFE User ID" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">

Federally Facilitated Marketplace (FFM)

```
<saml2:AttributeValue>john.doe@email.com</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Transfer Type" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">
<saml2:AttributeValue>Completed Eligibility
Application</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Exception Reason"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue></saml2:AttributeValue></saml2:Attribute>
</saml2:AttributeStatement><saml2:AuthnStatement AuthnInstant="2013-04-12T15:43:42.328Z"
        SessionIndex="session#1" SessionNotOnOrAfter="2013-04-12T15:43:42.328Z">
        <saml2:SubjectLocality Address="1234 Fishy LN, PEORIA, IL 20190"
            DNSName="2.175.111.190" />
        <saml2:AuthnContext>
            <saml2:AuthnContextClassRef>urn:oasis:names:tc:SAML:2.0:ac:classes:Password
            </saml2:AuthnContextClassRef>
        </saml2:AuthnContext>
    </saml2:AuthnStatement>
</saml2:Assertion>
</saml2p:Response>
```

Federally Facilitated Marketplace (FFM)

**For Sample 2, User Type is consumer and Transfer Type is Exception on Eligibility Application.**

&lt;?xml version="1.0" encoding="UTF-8"?&gt;

&lt;saml2p:Response ID="413be1b7-ac2d-4324-a359-998935f11a66"
    IssueInstant="2013-04-12T15:43:42.389Z" Version="2.0"
    xmlns:saml2p="urn:oasis:names:tc:SAML:2.0:protocol"&gt;
    &lt;saml2p:Status&gt;
        &lt;saml2p:StatusCode Value="urn:oasis:names:tc:SAML:2.0:status:Success" /&gt;
    &lt;/saml2p:Status&gt;

&lt;saml2:Assertion Version="2.0" ID="SamlAssertion-25171a8736ed098dde8659e5ba250b5f"
IssueInstant="2013-04-19T20:16:07.090Z"
xmlns:saml2="urn:oasis:names:tc:SAML:2.0:assertion"&gt;&lt;saml2:Issuer
Format="urn:oasis:names:tc:SAML:1.1:nameid-format:unspecified"&gt;ffx-ffe-w7-
15.cgifederal.com&lt;/saml2:Issuer&gt;&lt;ds:Signature
xmlns:ds="http://www.w3.org/2000/09/xmldsig#"&gt;&lt;ds:SignedInfo&gt;&lt;ds:CanonicalizationMethod
Algorithm="http://www.w3.org/2001/10/xml-exc-c14n#"/&gt;&lt;ds:SignatureMethod
Algorithm="http://www.w3.org/2000/09/xmldsig#rsa-sha1"/&gt;&lt;ds:Reference URI="#SamlAssertion-
25171a8736ed098dde8659e5ba250b5f"&gt;&lt;ds:Transforms&gt;&lt;ds:Transform
Algorithm="http://www.w3.org/2000/09/xmldsig#enveloped-signature"/&gt;&lt;ds:Transform
Algorithm="http://www.w3.org/2001/10/xml-exc-c14n#"/&gt;&lt;/ds:Transforms&gt;&lt;ds:DigestMethod
Algorithm="http://www.w3.org/2000/09/xmldsig#sha1"/&gt;&lt;ds:DigestValue&gt;VLIECSLwNnRpczRvI
IUcGuospVk=&lt;/ds:DigestValue&gt;&lt;/ds:Reference&gt;&lt;/ds:SignedInfo&gt;&lt;ds:SignatureValue&gt;m3nxFPAc
BXJ+EgrI6FrTYGWL9n8o9HtxkG4Dzsp8lNGYNSle/+FmLvkwbvzMgcbhNuJv86GcAGOZfVNE
P3acP/Eg9at2jf/HaEn50vVgq4jl40BGWsGWdq97x2IlBzBtMv5aOxWnrx2hZmiDs8uQVK+P5YUp
CPZxo3ki3NdxL7et7wTRas27XgZei2oVn8lxHsiNoBkS5DDBdCBxOOOvrxHmpAw38J6+uQ8w9
KufOZKJwXpt8EKhi1dqje6t/s3jY3yYPQird9NXRiXU8uKnQEki/11/zOoBrcrlXl9isF7JB6NkgWp
+6VaRapjik3JPJ/PLA/PRS48H8xpJnZvthA==&lt;/ds:SignatureValue&gt;&lt;KeyInfo
xmlns="http://www.w3.org/2000/09/xmldsig#"&gt;&lt;X509Data&gt;&lt;X509SubjectName&gt;CN=ffx-ffe-w7-
15.cgifederal.com,OU=ffx,OU=ffe,O=cgifederal,L=Herndon,ST=VA,C=US&lt;/X509SubjectName&gt;
&lt;X509Certificate&gt;MIIDqTCCApGgAwIBAgIERfXhazANBgkqhkiG9w0BAQsFADCBhDELMAk
GA1UEBhMCVVMxCzAJBgNVBAgTAlZBMRAwDgYDVQQHEwdIZXJuZG9uMRMwEQYDV
QQKEwpjZ2lmZWRlcmFsMQwwCgYDVQQLEwNmZmUxDDAKBgNVBAsTA2ZmeDElMCM
GA1UEAxMcZmZ4LWZmZS13Ny0xNS5jZ2lmZWRlcmFsLmNvbTAeFw0xMzA0MTgxODA0N
DhaFw0yMzAyMjUxODA0NDhaMIGEMQswCQYDVQQGEwJVUzELMAkGA1UECBMCVkEx
EDAOBgNVBAcTB0hlcm5kb24xEzARBgNVBAoTCmNnaWZlZGVyYWwxDDAKBgNVBAsT
A2ZmZTEMMAoGA1UECxMDZmZ4MSUwIwYDVQQDExxmZngtZmZlLXc3LTE1LmNnaWZl

Callout annotations:
- SAML Protocol Response
- Digital signature signed by FFE Public Key
- X509 Digital Certificate for FFE used for signing the SAML Assertion

Federally Facilitated Marketplace (FFM)

ZGVyYWwuY29tMIIBIjANBgkqhkiG9w0BAQEFAAOCAQ8AMIIBCgKCAQEAuXiXhbS4Nb9n
IKAxC5rsUk/bivpvsCcc4QQbqNG+CFFIPnZi1QUAOmUm7cm/Pcn2nvmXf6PTLfi3sVgrpxfsN/3
TpCKxYTN87fKbE0fQLLmLjVFu6pUsU7ZsAcKb66/PynkoweUbBhAMgR1h3Q01SnEcN6eD0D
751O720YlV/pcZFzTdAjU2H2EFRAUxO395+/iMCkm9iD+Plb84hy3HhBqJUuMr2KlCDgkLHYb
kfUWZabbNKkZWp51q+5oeRCKXhCYjWQGbwxfQeo0ODV95IJdWryFJB8E5CVkwHbo7guNh
5BAzNGtYix0VrKJkvXd/l0CRi8d5yyeR56bdhSoOGQIDAQABoyEwHzAdBgNVHQ4EFgQUeda/
7pq6i+1iRvGKMnJuP0FeX/kwDQYJKoZIhvcNAQELBQADggEBABn2/003wPonfGX+gAjSaQC
dtnqs0FAZCc7NLEE3tJSmmhHF2Mr45PkiA01fsxTqV9rrdfyIu7Jtl0Y3/rVLBuZyUftAWxpAZyFT
68Nw0/Kzc1NyyM3TN6eYRSvfOZHBlrwKCG1iExqmG3ucQtarEJvY/It6PMdWb3WLqLzD//2JbI
Ijz9Sq87TkSPvFyDzrS7OlmeOgfOHV6yVjXDzB9XPRMHm9bo0qJZG1apI2M6Sph0imG8Wo/fm
Ys1hWdMr9z5uTvB9g5ALL/AQOvwJBvdVo+qszOAy2wv4uuy0eIoJRMYO7KHEaUqRc5kbeKw
rw4I2hUysIQwnxZ5L0MaTpo8Q=</X509Certificate></X509Data></KeyInfo></ds:Signature><sa
ml2:Subject>

<saml2:NameID Format="urn:oasis:names:tc:SAML:1.1:nameid-format:unspecified"
NameQualifier="">test</saml2:NameID>

Name ID

<saml2:SubjectConfirmation Method="urn:oasis:names:tc:SAML:2.0:cm:sender-
vouches"><saml2:NameID>CN=ffx-ffe-w7-15.cgifederal.com, OU=ffx, OU=ffe, O=cgifederal,
L=Herndon, ST=VA, C=US</saml2:NameID></saml2:SubjectConfirmation></saml2:Subject>

Sender Confirmation method, sender vouches in this case

<saml2:Conditions NotBefore="2013-04-19T20:14:08.437Z" NotOnOrAfter="2013-04-
19T20:21:08.437Z"/>

SAML Validation Conditions

<saml2:AttributeStatement>

<saml2:Attribute Name="Information Exchange System ID"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>12121212</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="StateExchangeCode"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>MD0</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Partner Assigned Consumer ID"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>1234</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="FFE Assigned Consumer ID"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>6ad66f44-d7f3-4ec1-b832-
bb769749ff1c</saml2:AttributeValue></saml2:Attribute>

Partner/Consumer Identifier Information

<saml2:Attribute Name="User Type" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:unspecified">

Transfer Information

Federally Facilitated Marketplace (FFM)
<saml2:AttributeValue>Consumer</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="FFE User ID" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>john.doe@email.com</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Transfer Type" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>Exception on Eligibility
Application</saml2:AttributeValue></saml2:Attribute>
<saml2:Attribute Name="Exception Reason"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:unspecified">
<saml2:AttributeValue>Consumer Failed Identity
Proofing</saml2:AttributeValue></saml2:Attribute>
</saml2:AttributeStatement><saml2:AuthnStatement AuthnInstant="2013-04-12T15:43:42.328Z"
        SessionIndex="session#1" SessionNotOnOrAfter="2013-04-12T15:43:42.328Z">
        <saml2:SubjectLocality Address="1234 Fishy LN, PEORIA, IL 20190"
            DNSName="2.175.111.190" />
        <saml2:AuthnContext>
            <saml2:AuthnContextClassRef>urn:oasis:names:tc:SAML:2.0:ac:classes:Password
            </saml2:AuthnContextClassRef>
        </saml2:AuthnContext>
    </saml2:AuthnStatement>
</saml2:Assertion>
</saml2p:Response>

## 6.3.2.2.    Response

None

# 7. Web Services Integration

## 7.1. Overview

This section applies only to partner websites utilizing the Direct Enrollment API. The Direct Enrollment API would include two web services exposed by the FFM:

- WS.WB.FFE.01 - Fetch Household/Eligibility Details
- WS.WB.FFE.02 - Submit Enrollment/Change/Disenrollment Transaction

The "Fetch Household/Eligibility Details" web service would allow the partner website to query the FFM and fetch information on the household and eligibility information for members of the household. The response would also include current enrollment status of members in the household and any Enrollment Periods available for members to enroll and change plans. This information can be used by the partner website to tailor the plan shopping/ enrollment maintenance experience of the consumer.

The Submit Enrollment/Change/Disenrollment web service would allow the partner website to submit new enrollment and change transactions to the FFM for processing. The FFM will be the system of record for QHP enrollments and all enrollment-related transactions need to be processed on the FFM. The normal FFM enrollment workflow including sending x12-834 transactions to the Issuer would be executed when this web service is invoked.

## 7.2. Technical Implementation

The Web Services Interactions between Partner site and FFM will be brokered through the CMS Data Services Hub. The web services interaction will need to include the FFE Assigned Consumer ID that is issued at the completion of eligibility determination by the user that was transferred to the FFM website from the partner website.

All web services will be brokered through the CMS Data Services Hub and follow the same messaging standards established by the Hub Please refer to the companion document "Federal Data Services Hub (DSH) - Requester Onboarding Summary Document" for information on web services interactions with the FFM.

## 7.3.    Web Service Specifications

This section of the document presents details on web services exposed by the FFM. The following details are included for each web service

- Service Description: An overview of the service along with information on correct usage.

- Key Business Rules/Constraints:  Business rules and constraints to be accounted for when using the web service as part of the process orchestration on the partner website

- Request: Information model for the web service request. Includes a list of data elements organized under structures of Segments and Data Element Groups. Information on the data elements include a description in the given context, data type, length, and optionality. Data Element Groups are a logical grouping of related data elements. A segment is collection of Data Element Groups.

## 7.3.1. Fetch Household/ Eligibility Details (WS.WB.FFE.01)

### 7.3.1.1.    Service Description
This FFM Web service is a query service that will return details of the consumer's household along with information on their eligibility for financial assistance. Information returned by this service will include:

- Contact Person Information: The contact person on the eligibility application (also referred to as the application filer) will be the same individual referred to as the consumer in the direct enrollment context. The web service will return the Name, Address, Birth Date, Telephone and contact preferences for the contact person.

- Applicant Information: An applicant is a member of the household listed on the application that is seeking health insurance coverage.  There could be one or more applicants on the eligibility application and the web service will return information relating each of those applicants. The Applicant Information returned will include:

  – Identifying Information

  – Name, Address, and demographic information

  – Relationship to other applicants in the household

  – Eligibility Information: Information on eligibility for QHP with or without APTC/CSR, eligibility for Medicaid and CHIP. Eligibility Information will be included for the prior six months and any period in the future. Changes in eligibility will be communicated via distinct snapshots of eligibility details for the applicant over the prior six months onward.

  – Eligibility for Enrollment Periods: Details on whether the applicant is currently eligible for an Initial/Annual Enrollment Period and/or a Special Enrollment Period. The start and end dates associated with the enrollment periods will also be included.

  – Enrollment Information: Provides enrollment history over the prior six months and any periods in the future. Enrollment history will be organized as enrollment groups (Issuer Policy) and a list of members included in the enrollment group/policy.

    - Information on an enrollment group will include an Issuer ID, Assigned QHP ID, Issuer Policy Number, FFE Assigned Policy Number and Start and End dates of the policy. Please note that the Issuer Policy Number, Issuer ID and Plan ID will not be included if a

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consumer were to shop through a partner's website where the partner is not associated with the Issuer of the policy.

- Information on members of the enrollment group will include
  - Identifying Information - FFE Assigned Applicant ID (a unique ID for a household member within the application), Issuer Assigned Member ID, FFE Assigned Member ID (a unique ID for the member within the context of that specific Issuer)
  - Subscriber information/relationship to subscriber
  - Start and end date of the member on the enrollment group including information on enrollment period used
  - Smoking status
  - Information on any pending auto disenrollments

## 7.3.1.2. Key Business Rules/ Constraints (TBD)

- Partner Assigned Consumer ID - This is a unique ID assigned by the Partner to the consumer which the FFM will pass back to the Partner when responding to requests from the Partner. The FFM expects the Partner to enforce uniqueness on this ID so FFM will not be enforcing uniqueness of the ID within FFM.

- FFE Assigned Consumer ID - FFM generates and assigns a Consumer ID as soon as FFM has sufficient information to create a basic account (i.e., prior to passing RIDP proofing) which subsequently become the primary identifier for the partner to use in retrieving the consumer's information. The FFE Assigned Consumer is only unique within the context of the given partner within a given exchange.

- Enrollment History - The exchange will only provide the full enrollment history details for enrollment in QHPs where the partner is affiliated with the Issuer of the QHP. For enrollment history of other QHPs where the partner is not affiliated with the QHP's Issuer, the exchange will only provide information regarding the covered timeframe.

### 7.3.1.3. Fetch Household/ Eligibility Details (WS.WB.FFE.01) - Request

Table 8 provides the data elements for the partner's request to retrieve current eligibility, eligibility history and enrollment history for members of the consumer's household.

**Table 8 - Fetch Household/ Eligibility Details - Request**

| Fetch Household/Eligibility Details (WS.WB.FFE.01) - Request | | | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| *Partner/ Consumer Info* | | | | | | |
| | Information Exchange System ID | R | Unique Identifier assigned to the Partner Website by the Federal Data Services Hub as part of the onboarding process for the partner | String | 1 | 32 |
| | User Type | R | Type of the user logged on to the partner website <br> • Consumer <br> • Partner Call Center Rep <br> • Agent <br> • Broker | String | 1 | 18 |
| | State Exchange Code | R | Code indicating the specific state instance of the FFM on which eligibility was determined. <br> 2 Character State Abbreviation followed by a digit. The last position will always be '0'. | String | 3 | 3 |
| | Partner Assigned Consumer ID | R | Unique Identifier assigned by Partner Website for the consumer for interacting with the FFM. | String | 32 | 32 |
| | FFE Assigned Consumer ID | R | Unique Identifier assigned by the FFM for the consumer's eligibility determination interaction. | String | 32 | 32 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| *User Identity Assertion* | | | Partner's assertion on the identity of the user on behalf of whom the web service call is made. Required when User is an Agent or a Broker. | | | |
| | FFE User ID | C | User ID of the user accessing FFM. Only applicable when User Type is Partner Call Center Rep, Agent or Broker. | String | 1 | 50 |
| | First Name | R | First name of the user accessing the FFM | String | 1 | 50 |
| | Middle Name | O | Middle name of user accessing the FFM | String | 1 | 50 |
| | Last Name | R | Last name of the user accessing the FFM | String | 1 | 50 |

**Fetch Household/Eligibility Details (WS.WB.FFE.01) - Request** (column header spanning)

### 7.3.1.4. Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response

Table 9 provides data elements for the Fetch Household/Eligibility Details response.

**Table 9 - Fetch Household/Eligibility Details - Response**

| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| *Partner/ Consumer Info* | | | | | | |
| | Information Exchange System ID | R | Unique Identifier assigned to the Partner Website by the Federal Data Services Hub as part of the onboarding process for the partner | String | 1 | 32 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| **Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response** |
| | State Exchange Code | R | Code indicating the specific state instance of the FFM on which eligibility was determined. 2 Character State Abbreviation followed by a digit. The last position will always be '0'. | String | 3 | 3 |
| | Partner Assigned Consumer ID | R | Unique Identifier assigned by Partner Website for the consumer for interacting with the FFM. | String | 1 | 32 |
| | FFE Assigned Consumer ID | R | Unique Identifier assigned by the FFM for the consumer's eligibility determination interaction with the given partner. | String | 1 | 32 |
| **Contact Person Information** |
| *Contact Person Name* | | | | | | |
| | First Name | R | First name of the contact person | String | 1 | 50 |
| | Middle Name | O | Middle name of the contact person | String | 1 | 50 |
| | Last Name | R | Last name of the contact person | String | 1 | 50 |
| | Suffix Name | O | Suffix of the contact person: <ul><li>Jr.</li><li>Sr.</li><li>II</li><li>III</li><li>IV</li></ul> | String | 1 | 18 |
| *Contact Person Address* | | | May include Home address and Mailing Address, if different. Home address will be included by default. If the contact person does not have a fixed address, only Mailing address will be included**.** | | | |

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| | | | Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | Address Type Name | R | Name of Address Type<br>Home<br>Mailing | String | 1 | 10 |
| | Street Name 1 | R | Street address | String | 5 | 75 |
| | Street Name 2 | O | Apt/suite/etc. number | String | 5 | 75 |
| | City Name | R | Name of City | String | 5 | 100 |
| | State | R | State Code | String | 2 | 2 |
| | Zip Code | R | Zip Code | String | 5 | 9 |
| *Contact Person Demographic Information* | | | Demographic information for the contact person on the application. | | | |
| | SSN | O | Social Security Number of the contact person. | String | 9 | 9 |
| | Birth Date | R | Date of Birth of the contact person. | Date | 10 | 32 |
| *Telephone Number Group* | | | Telephone numbers of the contact person.<br>May be multiple instances of Telephone Number Group | | | |
| | Telephone Priority Type | R | Indicates if the phone number is preferred or secondary<br>• Preferred<br>• Secondary | String | 1 | 8 |
| | Phone Number | R | Phone Number to reach the contact. No alpha or symbols allowed. | String | 10 | 10 |
| | Telephone Type Name | R | Type of phone to be used for contact:<br>• Home<br>• Mobile<br>• Work<br>• Friend<br>• Employer | String | 2 | 18 |
| | Extension | O | Extension of the telephone number. Numeric up to 6 digits | Integer | 1 | 6 |

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| | | | Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | Email | O | Email address provided by the contact person. Will be used as the primary email for notifications. | String | 5 | 100 |
| *Preferences* | | R | Preferences for the household contact, including language preferences and contact preferences | | | |
| | Contact Method Type | R | Method the application filer would like to receive notices and notifications:<br>• US Mail<br>• Electronic with Text Notification<br>• Electronic with Email Notification | String | 1 | 18 |
| | Notification Cell Phone | C, required if Contact Method Type = Text | Cell phone number used to receive text notifications<br>No alpha or symbols allowed | String | 10 | 10 |
| | Notification Email Address | C, required if Contact Method Type = Email | Email address used to receive electronic notifications<br>Must contain "@", may not contain spaces or start/end with a hyphen or contain two hyphens together.<br>Cannot exceed 63 characters. | String | 5 | 63 |
| | Spoken Language | R | Single selection of preferred spoken language:<br>• English<br>• Spanish<br>• Vietnamese<br>• Tagalog<br>• Russian<br>• Portuguese<br>• Other | String | 1 | 18 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | Written Language | R | Single-selection of preferred written language:<br>• English<br>• Spanish<br>• Vietnamese<br>• Tagalog<br>• Russian<br>• Portuguese<br>• Other | String | 1 | 18 |
| *Application Type* | | | | | | |
| | Requesting Financial Assistance | R | True - Applicants are seeking financial Assistance<br>False - Applicants are not seeking financial assistance | Boolean | | |
| **Applicant Information** (Will repeat for each applicant, i.e., household member who is seeking health insurance coverage. Household members on the application not seeking health insurance coverage will not be included.) | | | | | | |
| *Applicant Identity* | | | | | | |
| | FFE Assigned Applicant ID | R | Unique identifier for the applicant within the household. Only unique for that application, not a generally unique ID across the system. Assigned by the FFM. | Integer | 10 | 10 |
| | SSN | O | Social security number of Applicant. No Dashes. | String | 9 | 9 |
| *Applicant Name* | | | Name of the applicant | | | |
| | First Name | R | First name of the Applicant | String | 1 | 50 |
| | Middle Name | O | Middle name of the Applicant | String | 1 | 50 |
| | Last Name | R | Last name of the Applicant | String | 1 | 50 |

| Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response |
|---|

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | Suffix Name | O | Suffix of the Applicant<br>• Jr.<br>• Sr.<br>• II<br>• III<br>• IV | String | 1 | 18 |
| *Applicant Demographic Info* | | | Demographic information of applicant | | | |
| | Birth Date | R | Date of birth of the Applicant. yyyy-mm-dd<br>Must be a valid date, year must be > 1912 and <= current year.  Entered in YYYY-MM-DD format.  Cannot be greater than current date. | Date | 10 | 32 |
| | Sex Name | R | Name of person's sex:<br>- Male<br>- Female | String | 1 | 10 |
| | Marital Status | O | Marital Status of the applicant<br>Y - Married<br>N - Single | String | 1 | 1 |
| | Student Status | O | Student Status of the Applicant<br>Y - Full Time Student<br>N - Not a Student | String | 1 | 1 |
| *Applicant Address* | | | May include multiple addresses, if different. Home address will be included by default. If the applicant does not have a fixed address, only Mailing address will be included. | | | |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | Address Type Name | R | Name of Address Type (multiple may apply to a single address) <br> • Home <br> • Mailing <br> • Residency <br> • Temporary <br> • Intend to Reside | String | 1 | 50 |
| | Street Name 1 | C | Street address of the address. <br> PO Box is not permitted if address type is Home. <br><br> Required if not intend to reside address | String | 5 | 75 |
| | Street Name 2 | O | Apt/suite/etc. number of the address. | String | 5 | 75 |
| | City | R | City of the address. | String | 5 | 100 |
| | State | R | State Code (abbreviation) of the address. | String | 2 | 2 |
| | Zip Code | R | Zip Code of the address. | String | 5 | 9 |
| | County Name | C | Name of County using standard FIPS name. <br> Will be included if Zip Code spans multiple counties. | String | 5 | 256 |
| | County Code | C | County Code <br> Will be included if Zip Code spans multiple counties. | String | 5 | 5 |

| | | | **Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response** | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| *Applicant Eligibility* | | | Information on the type of healthcare coverage that the applicant is eligible for. This will include information on eligibility for Medicaid, CHIP, or QHP with or without APTC and CSR. There may be multiple instances of this information to provide snapshots of the applicant's eligibility over a period of time. The eligibility snapshots will reflect changes in the applicant's eligibility over the prior six months and the future. | | | |
| | Eligibility Change Effective Date | R | Snapshot date or the Date on which there was a change to the applicant's eligibility for health insurance coverage. | Date | 10 | 32 |
| | Medicaid Eligibility Indicator | R | Indicator for whether the applicant is eligible for Medicaid<br>N - The applicant is not eligible for Medicaid<br>Y - The applicant is eligible for Medicaid | String | 1 | 1 |
| | Medicaid Eligibility Start Date | C | Start Date for eligibility for Medicaid. Will be included if Medicaid Eligibility Indicator is 'Y' | Date | 10 | 32 |
| | Medicaid Eligibility End Date | C | End Date for eligibility for Medicaid. Will be included, if available and Medicaid Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | CHIP Eligibility Indicator | R | Indicator for whether the applicant is eligible for CHIP<br>N - The applicant is not eligible for CHIP<br>Y - The applicant is eligible for CHIP | String | 1 | 1 |

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| | | | Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response | | | | |
|---|---|---|---|---|---|---|---|
| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
| | CHIP Eligibility Start Date | C | Start Date for eligibility for CHIP. Will be included if CHIP Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | CHIP Eligibility End Date | C | End Date for eligibility for CHIP. Will be included, if available and CHIP Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | QHP Eligibility Indicator | R | Indicator for whether the applicant is eligible for QHP N - The applicant is not eligible for QHP Y - The applicant is eligible for QHP | String | 1 | 1 |
| | QHP Eligibility Start Date | C | Start Date for eligibility for QHP. Will be included if QHP Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | QHP Eligibility End Date | C | End Date for eligibility for QHP. Will be included, if available and QHP Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | APTC Eligibility Indicator | R | Indicator for whether the applicant is eligible for APTC N - The applicant is not eligible for APTC Y - The applicant is eligible for APTC | String | 1 | 1 |
| | APTC Eligibility Start Date | C | Start Date for eligibility for APTC. Will be included if APTC Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | APTC Eligibility End Date | C | End Date for eligibility for APTC. Will be included, if available and APTC Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | Monthly APTC Amount | C | Prorated Maximum APTC Amount for the applicant. Will be included if APTC Eligibility Indicator is 'Y'. | Amount | | |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | | | **Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response** | | | |
| | CSR Eligibility Indicator | R | Indicator for whether the applicant is eligible for CSR<br>"N" - The applicant is not eligible for CSR<br>"Y" - The applicant is eligible for CSR | String | 1 | 1 |
| | CSR Eligibility Start Date | C | Start Date for eligibility for CSR. Will be included if CSR Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | CSR Eligibility End Date | C | End Date for eligibility for CSR. Will be included if available and if CSR Eligibility Indicator is 'Y'. | Date | 10 | 32 |
| | CSR Level | C | CSR Level applicable to the applicant.<br>Will be included if CSR Eligibility Indicator is 'Y'.<br>02 - Open to Members of Federally Recognized Tribes below 300%FPL<br>03 - Open to Members of Federally Recognized Tribes above 300%FPL<br>04 - 73% AV Level Silver Plan CSR<br>05 - 87% AV Level Silver Plan CSR<br>06 - 94% AV Level Silver Plan CSR | String | 2 | 2 |
| | QHP Eligibility Status Change | C | Indicator for any changes in QHP Eligibility status since the prior eligibility snapshot.<br>• No Change<br>• New Applicant for QHP<br>• Gained Eligibility for QHP<br>• Lost Eligibility for QHP<br>Will be included after initial eligibility is determined for subsequent eligibility changes. | String | 1 | 18 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | APTC Eligibility Status Change | C | Indicator for any changes in APTC Eligibility status since the prior eligibility snapshot.<br>• No Change<br>• Gained Eligibility for APTC<br>• Lost Eligibility for APTC<br>• Change in APTC Amount<br>Will be included after initial eligibility is determined for subsequent eligibility changes . | String | 1 | 18 |
| | CSR Eligibility Status Change | C | Indicator for any changes in APTC Eligibility status since the prior eligibility snapshot.<br>• No Change<br>• Gained Eligibility for CSR<br>• Lost Eligibility for CSR<br>• Change in CSR Level<br>Will be included after initial eligibility is determined for subsequent eligibility changes. | String | 1 | 18 |
| *Enrollment Period* | | | | | | |
| | IEP/AEP Eligibility Indicator | R | Indicator for whether the applicant is eligible for an Initial Enrollment Period (IEP) or Annual Enrollment Period (AEP).<br>Y - Eligible for IEP/AEP<br>N - Not Eligible for IEP/AEP | Boolean | | |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | | | **Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response** | | | |
| | IEP/AEP Type | C | Indicator for the whether the enrollment period is an IEP or an AEP. I -Initial Enrollment Period A -Annual Enrollment Period Will be included if "IEP/AEP Eligibility Indicator" is 'Y'. | String | 1 | 1 |
| | IEP/AEP Start Date | C | Date from which IEP/AEP is available. Will be included if "IEP/AEP Eligibility Indicator" is 'Y'. | Date | 10 | 32 |
| | IEP/AEP End Date | C | Date until which IEP/AEP is available. yyyy-mm-dd. Will be included if "IEP/AEP Eligibility Indicator" is 'Y'. | Date | 10 | 32 |
| | IEP/AEP Earliest QHP Effective Date | C | Earliest date the applicant's enrollment in a QHP can become effective. yyyy-mm-dd. Will be included if "IEP/AEP Eligibility Indicator" is 'Y'. | Date | 10 | 32 |
| | IEP/AEP Latest QHP Effective Date | C | Latest date the applicant's enrollment in a QHP can become effective. yyyy-mm-dd. Will be included if "IEP/AEP Eligibility Indicator" is 'Y'. | Date | 10 | 32 |
| | SEP Eligibility Indicator | R | Indicates whether the applicant is eligible for a Special Enrollment Period. Y - Eligible for SEP N - Not eligible for SEP | String | 1 | 1 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | SEP Eligibility Reason | C | Reason why SEP was granted. See Appendix A.2 SEP Reason Code for a list of SEP reasons. Will be included if "SEP Eligibility Indicator" is 'Y'. | String | 2 | 2 |
| | SEP Start Date | O | Date from which SEP is available. yyyy-mm-dd. Will be included if "SEP Eligibility Indicator" is 'Y'. | Date | 10 | 32 |
| | SEP End Date | O | Date until which the SEP is available. yyyy-mm-dd. Will be included if "SEP Eligibility Indicator" is 'Y'. | Date | 10 | 32 |
| | SEP Earliest QHP Effective Date | C | Earliest date the applicant's enrollment in a QHP can become effective. yyyy-mm-dd. Will be included if "SEP Eligibility Indicator" is 'Y'. | Date | 10 | 32 |
| | SEP Latest QHP Effective Date | C | Latest date the applicant's enrollment in a QHP can become effective. yyyy-mm-dd. Will be included if "SEP Eligibility Indicator" is 'Y'. | Date | 10 | 32 |
| **Relationship to Other Applicants (repeat for each applicant besides the currently selected applicant)** The FFE Assigned Applicant ID for each of the other household members in conjunction with a corresponding relationship code will communicate the relationships between this applicant and the rest of the household. This information will be used by the partner website for composing enrollment groups. | | | | | | |
| *Relationship to Other Applicants Information* | | | | | | |
| | FFE Assigned Applicant ID | R | The FFE Assigned Applicant ID for another applicant within the household | Integer | 1 | 10 |

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| | | | Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | Relationship to Applicant (CMS is continuing to work on final set of values for this list) | R | The relationship of the household member to the applicant. See Relationship Codes for the list of values. | String | 1 | 18 |
| **Other Person Information** (Will repeat for person on the application besides the application contact and the applicants whose names needs to be provided to the partner for gathering APTC attestation. The other persons are persons who are tax filers and are not the application contact and are not applicants [household members seeking coverage]) | | | | | | |
| *Other Person Name* | | | | | | |
| | First Name | R | First name of the other person | String | 1 | 50 |
| | Middle Name | O | Middle name of the other person | String | 1 | 50 |
| | Last Name | R | Last name of the other person | String | 1 | 50 |
| | Suffix Name | O | Suffix of the other person<br>• Jr.<br>• Sr.<br>• II<br>• III<br>• IV | String | 1 | 18 |
| **Existing Enrollment Information**<br>This existing policy information set of data elements will repeat to include information on all policies in the prior six months and any prospective policies. | | | | | | |
| *Enrollment Group Information* | | | Includes information on a group of applicants enrolled in a health insurance plan together. This corresponds to a policy issued by an Issuer under which one or more application members are enrolled. | | | |
| | FFE Assigned Policy Number | R | Unique ID assigned by the FFM for the policy. | String | 1 | 50 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| **Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response** | | | | | | |
| | Issuer Policy Number | C | Unique ID assigned by the Issuer for the policy.<br>Will only be included if the partner is associated with the Issuer of the policy. | String | 1 | 50 |
| | Start Date | R | Effective date on which coverage commenced under the policy. In case of a cancelled enrollment, this will be the date on which the policy would had commenced. | Date | 10 | 32 |
| | End Date | C | Effective date on which coverage under the policy ended.<br><br>Required when Enrollment Status is Terminated. | Date | 10 | 32 |
| | Enrollment Status | R | Status of the enrollment:<br>• Pending Effectuation<br>• Cancelled<br>• Effectuated<br>• Terminated | String | 1 | 50 |
| | Issuer ID | C | Issuer of the Policy.<br>Will only be included if the partner is associated with the Issuer of the policy. | String | 5 | 5 |
| | Assigned QHP ID | C | Assigned QHP ID for the policy.<br>Will only be included if the partner is associated with the Issuer of the policy. | String | 16 | 16 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| *Premium Information* | | | The details of the premium information for the enrollment group for a time period within the Enrollment Group Start Date and the Enrollment Group End Date. There may be multiple instances of Premium information for an enrollment group. Will only be included if the partner is associated with the Issuer of the policy | | | |
| | Premium Start Date | C | Date from which the premium information is applicable. Will only be included if the partner is associated with the Issuer of the policy | Date | 10 | 32 |
| | Premium End Date | O | Date till which the premium information is applicable | Date | 10 | 32 |
| | Total Premium Amount | C | Total premium amount for the enrollment group Will only be included if the partner is associated with the Issuer of the policy | Amount | | |
| | Maximum Enrollment Group Eligible APTC | C | For the enrollment group, the maximum allowed APTC amount for all applicants eligible to receive APTC, as determined in eligibility. Will only be included if the partner is associated with the Issuer of the policy | Amount | | |

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| | Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response | | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | APTC Elected % | C | Percent of the maximum APTC elected by the consumer to apply towards premium costs.<br><br>Will not be sent if the % is not the same for all individuals or if this is not applicable because the applicants were not seeking financial assistance. | Double | | |
| | APTC Applied Amount | C | Total amount of APTC elected by the consumer for the enrollment group. Will not be sent if APTC is not applicable (i.e., no financial assistance application) Will only be included if the partner is associated with the Issuer of the policy | Amount | | |
| | Total Individual Responsibility Amount | C | Net premium amount (after applying the APTC amount elected) that will be paid by the consumer. Will only be included if the partner is associated with the Issuer of the policy | Amount | | |
| *Member Information* | | | Information on a household member included in the policy. This group of information will repeat for each member in the policy. It is to be noted that members may be added or removed from a policy at different points in time within the start and end dates of the policy. | | | |

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| | | | | | | |
|---|---|---|---|---|---|---|
| **Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response** | | | | | | |
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | FFE Assigned Applicant ID | R | Unique identifier for an applicant member within the household corresponding to the member of the policy. Only unique for that application, not a generally unique ID across the system. Assigned by the FFM. | Integer | 1 | 10 |
| | Start Date | R | Date on which coverage started for this household member on this policy. | Date | 10 | 32 |
| | End Date | O | Date on which coverage ended for this household member on this policy. | Date | 10 | 32 |
| | FFE Assigned Member ID | C | Unique ID assigned to each member enrolled with an Issuer. This ID is unique for an individual within the context of an Issuer. Will only be included if the partner is associated with the Issuer of the policy. | String | 1 | 50 |
| | Issuer Assigned Member ID | C | Unique ID assigned by the Issuer of the policy for the member. Will only be included if the partner is associated with the Issuer of the policy | String | 1 | 50 |
| | Subscriber Indicator | R | Y - Yes N - No | String | 1 | 1 |
| | Relationship to Subscriber | R | Code indicating the relationship of this member to the subscriber. See Appendix A.1 Relationship Codes for list of valid values. | String | 2 | 2 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | | | **Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response** | | | |
| | Tobacco Use Indicator | R | Indicator to whether the member currently uses Tobacco products or has used Tobacco products in the past.<br>N - Not a Tobacco user<br>Y - Yes, a Tobacco user | Boolean | | |
| | Last date of Tobacco Use | C | Last date on which the applicant used tobacco products. This will be required when Tobacco Use Indicator is 'Y'. | Date | 10 | 32 |
| | Enrollment Period Type | R | Indicator for Enrollment Period Type used for the enrollment<br>I - Initial Enrollment Period<br>A- Annual Enrollment Period<br>S - Special Enrollment Period | String | 1 | 1 |
| | Special Enrollment Reason Code | C | Reason for Special Enrollment Period.<br>Will be included "Enrollment Period Type Indicator" is 'S'.<br>See Appendix A.2 SEP Reason Code for a list of values. | String | 2 | 2 |
| | Cancelation/Termination Reason Code | C | Maintenance type code corresponding to the reason for disenrollment.<br>See Appendix Maintenance Reason Codes for a list of valid values.<br>Will be included when "Enrollment Status" is 'Cancelled' or 'Terminated'. | String | 2 | 2 |
| | Auto Disenrollment Pending Indicator | O | Y - Yes<br>N - No | Boolean | | |

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| | | | **Fetch Household/Eligibility Details (WS.WB.FFE.01) - Response** | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | Auto Disenrollment Reason | C | Will be included when "Auto Disenrollment Pending Indicator" is 'Y'.<br>• Loss of APTC Eligibility due to gaining Medicaid/CHIP Eligibility<br>• Loss of Eligibility for APTC/CSR due to other eligibility criteria including Income and household size | String | 1 | 50 |
| | Auto Disenrollment Effective Date | C | First date on which health insurance coverage will become unavailable under this policy.<br>Will be included when "Auto Disenrollment Pending Indicator" is 'Y'. | Date | 10 | 32 |
| | Auto Disenrollment Scheduled Date | C | Date on which auto disenrollment will be processed.<br>Will be included when "Auto Disenrollment Pending Indicator" is 'Y'. | Date | 10 | 32 |
| | Auto Disenrollment Cancelled by Application Contact Indicator | C | Indicator to whether the application contact has indicated their intent to continue the enrollment without APTC/CSR and hence cancelled the auto disenrollment<br>• Y - Yes<br>• N - No<br><br>Will be included when "Auto Disenrollment Pending Indicator" is 'Y'. | Boolean | | |

Federally Facilitated Marketplace (FFM)

| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | Auto Disenrollment Cancelled Date | C | Date on which Application Filer indicated their intent to continue the enrollment without APTC/CSR. Will be included when "Auto Disenrollment Pending Indicator" is 'Y' and if response to "Auto Disenrollment Cancelled by Application Filer Indicator" is 'Y'. | Date | 10 | 32 |

## 7.3.2. Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02)

### 7.3.2.1. Service Description

This FFM web service will process an enrollment request from the partner website. The request could be a new enrollment or changes to existing enrollments, including terminations/cancellations. The request may include information on one or more enrollment groups for the given household. The FFM will validate the information in the request against information on the application (including eligibility). FFM will also validate the premium computation, APTC applied and CSR Level prior to processing the enrollments. If information on any of the enrollment groups fails validation checks the entire request will be rejected. Requests that pass all validation checks will be processed by the FFM and enrollment details communicated to the Issuer via x12-834 transaction.

### 7.3.2.2. Key Business Rules/Constraints

The key business rules and constraints are:

- Applying APTC - As part of the Fetch Eligibility service, the Exchange will provide the maximum APTC that can be applied based on their eligibility at an individual level. The APTC to be applied to the enrollment selection is then further adjusted as follows:

    - The partner will gather from the consumer a single percentage of the APTC to be used which then needs to be applied to every applicant's individual APTC amount. For example: Person A and Person B are applicants with individual APTC amounts of $100 and $60 respectively. The consumer wants to only use 50% of the APTC. The individual APTC amounts would be reduced for Person A and Person B to $50 and $30, respectively.

    - Once the applicants are grouped into enrollment groups, the amount of APTC to be applied to the policy is the lesser of either the summed individual APTC amounts after applying rule 1 above or the summed EHB portion of the premium for the enrollment group. Continuing with the example above, if Person A and B enroll together in a plan where the EHB portion of the premium is $90, the APTC applied to the policy will be $80 ($50 + $30). If instead the EHB portion of the premium was $70, the APTC applied to the policy would be $70.

- Obtaining APTC Attestation – As part of the Fetch Eligibility service, the FFM would have provided the names of the persons who may be the tax filer since the tax filer(s) may be the application contact, applicants or other persons provided by FFM. The partner will need to have the consumer select the tax filers from the persons provided and for each person the consumer selects as a tax filer, provide an APTC attestation for the person. When the FFM receives the attestation information, the FFM will validate that the persons which have attestations match the tax filers on the application. A change is planned for a future version to indicate which persons are tax filers and allow partners to collect attestations for the specific people identified as tax filers.

- Assigning CSR level - If an enrollment group includes individuals that are eligible for different CSR Levels, the CSR level applied to the enrollment group as a whole would be the least beneficial CSR level that a member in the enrollment group is eligible for. The following is a list of CSR levels that could apply to various members of a household. More detailed information on

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appropriate application of a CSR level for an enrollment group will be included in future versions of this document.

1. (Variant = 01) Individuals not eligible for CSRs

2. (Variant = 03) Individuals who are Indians enrolled in a QHP that are furnished an item or service directly by the Indian Health Service, an Indian Tribe, Tribal Organization, or Urban Indian Organization or through referral under contract health services shall have no cost-sharing imposed under the plan for such item or service.

3. (Variant = 04) Individuals who are expected to have a household income greater than 200 percent of FPL and less than or equal to 250 percent of FPL for the benefit year.

4. (Variant = 05) Individuals who are expected to have a household income greater than 150 percent of the FPL and less than or equal to 200 percent of the FPL for the benefit year and for which coverage is requested.

5. (Variant = 06) Individuals who are expected to have a household income greater than or equal to 100 percent of FPL and less than or equal to 150 percent of FPL for the benefit year for which the coverage is requested, or an individual who is eligible for APTC under the special rule for non-citizens who are lawfully present and who are ineligible for Medicaid by reason of immigration status, that have a household income less than 100 percent of FPL for the benefit year for which coverage is requested.

6. (Variant = 02) Individuals who are Indians that are eligible for CSRs under the general requirements and have a household income that does not exceed 300 percent of FPL

- Note: This rule does not preclude qualified individuals with different levels of eligibility for CSRs from enrolling in separate policies to secure the highest CSRs for which they are respectively eligible.

- Applying Enrollment Periods
  - Rules surrounding Enrollment Periods will be included in a future version of this document.
- Submitting Initial Enrollments
  - While submitting Initial Enrollments, the request shall include information at the policy level as well as member level information on all members to be included in the enrollment group.

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- If members to be included in an enrollment group are currently enrolled (either under a plan offered by an Issuer associated with the partner website or otherwise), the request shall only include information on the new enrollment group. As part of processing the enrollment request, the FFM will automatically terminate the coverage of the members from their prior enrollment.

- While processing an initial enrollment request, the FFM will validate that all members of the household determined eligible for APTC will be enrolled after processing the request. This could include situations when all members of the household are enrolling together (as part of one or more enrollment groups) or part of the household is changing plans, either as an entire enrollment group or splitting or merging enrollment groups

- Enrollment/Policy changes

  - A partner website may help any consumer through submitting eligibility changes. However, a partner website may allow enrollment/policy changes (change in membership as well as other changes to the policy) only if all enrollments associated with the consumer's application were submitted through the partner website. The FFM would address the enrollment changes directly resulting from eligibility changes such as those resulting from periodic redeterminations. While submitting changes to existing policies, the request will include information at the policy level and specific members for whom the changes apply. If there are no member specific changes, member level information need not be included.

- Situations involving Auto Disenrollment

  - When a partner is enrolling applicants that are switching from one QHP to another QHP, the partner will only submit the enrollment for the new QHP and the Exchange will submit the cancelation/termination for the previously selected QHP.

  - Partner may only submit consumer voluntary termination for enrollments in QHPs where the partner is affiliated with the QHP's Issuer.

  - When a partner submits a change for a consumer that results in applicants being auto-disenrolled due to eligibility changes, the exchange will initiate the auto-disenrollment. The below situations detail when the exchange will initiate auto-disenrollment:

    - Applicant that is currently in a QHP gains Medicaid or CHIP eligibility which also means the person is no longer eligible for APTC and CSR. The exchange will transfer the applicant to Medicaid or CHIP and set a clock to terminate the applicant's QHP coverage unless the consumer responds prior to the clock expiring to keep the applicant in the QHP coverage without financial assistance.

    - Applicant that loses QHP eligibility will be terminated from QHP per the termination date rules defined in CFR 155.430.

- Voluntary Disenrollments

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- Rules surrounding Voluntary disenrollments will be specified in a future version of this document.

- Premium, APTC and CSR

  - The FFM will calculate the Premium amount for each enrollment group/policy, apply the applicable APTC amount and compare with the information sent as part of the request. If the amounts do not match, the request will be rejected along with the correct amounts. The same check applies to the CSR level for each enrollment group/policy.

## 7.3.2.3. Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Request

Table 10 provides the data elements to be included in a request to initiate enrollment, change enrollment or disenroll one or members of the consumer's household.

**Table 10 - Submit Enrollment/Change/Disenrollment Transaction - Request**

<table>
<tr><th colspan="7">Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Request</th></tr>
<tr><th>Data Element Group</th><th>Data Element</th><th>Required(R), Optional(O), Conditional(C)</th><th>Description</th><th>Data Type</th><th>Min Length</th><th>Max Length</th></tr>
<tr><td colspan="7"><strong>Partner/ Consumer Identification</strong></td></tr>
<tr><td></td><td>Information Exchange System ID</td><td>R</td><td>Unique Identifier assigned to the Partner Website by the Federal Data Services Hub as part of the onboarding process for the partner</td><td>String</td><td>1</td><td>32</td></tr>
<tr><td></td><td>User Type</td><td>R</td><td>Type of the user logged on to the partner website<br>• Consumer<br>• Partner Call Center Rep<br>• Agent<br>• Broker</td><td>String</td><td>5</td><td>32</td></tr>
<tr><td></td><td>State Exchange Code</td><td>R</td><td>Code indicating the specific state instance of the FFM on which eligibility was determined.<br>2 Character State Abbreviation followed by a digit. The last position will always be '0'.</td><td>String</td><td>3</td><td>3</td></tr>
<tr><td></td><td>Partner Assigned Consumer ID</td><td>R</td><td>Unique Identifier assigned by Partner Website for the consumer for interacting with the FFM.</td><td>String</td><td>1</td><td>32</td></tr>
</table>

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| | | Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Request | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | FFE Assigned Consumer ID | R | Unique Identifier assigned by the FFM for the consumer's eligibility determination interaction. | String | 1 | 32 |
| *User Identity Assertion* | | | Partner's assertion on the identity of the user on behalf of whom the web service call is made. Required when User is an Agent or a Broker. | | | |
| | FFE User ID | C | User ID of the user submitting the enrollment to FFM.  Only applicable when User Type is Partner Call Center Rep, Agent or Broker. | String | 1 | 50 |
| | First Name | R | First name of the user accessing the FFM | String | 1 | 50 |
| | Middle Name | O | Middle name of user accessing the FFM | String | 1 | 50 |
| | Last Name | R | Last name of the user accessing the FFM | String | 1 | 50 |
| **Agent/ Broker Information** | | | | | | |
| *Agent/ Broker Identification* | | | | | | |
| | Agent Or Broker Indicator | R | Indicator for whether the information relates to an Agent or Broker  • Agent  • Broker | String | 1 | 18 |
| | National Producer Number | R | National Producer Number of Agent/ Broker | String | 1 | 10 |
| | Agent/ Broker First Name | R | First name of the Agent/ Broker to be associated with the enrollment transaction | String | 1 | 50 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | Agent/ Broker Middle Name | O | Middle name of the Agent/ Broker to be associated with the enrollment transaction | String | 1 | 50 |
| | Agent/ Broker Last Name | R | Last name of the Agent/ Broker to be associated with the enrollment transaction | String | 1 | 50 |
| | Agent/ Broker Name Suffix | O | Name suffix of the Agent/ Broker to be associated with the enrollment transaction | String | 1 | 50 |
| **APTC Attestation** (Will repeat for person on the application besides the application contact and the applicants whose name needs to be provided to the partner for gathering APTC attestation). | | | | | | |
| *Attestation Information* | | | | | | |
| | First Name | R | First name of the other person | String | 1 | 50 |
| | Middle Name | O | Middle name of the other person | String | 1 | 50 |
| | Last Name | R | Last name of the other person | String | 1 | 50 |
| | Suffix Name | O | Suffix of the other person <br> • Jr. <br> • Sr. <br> • II <br> • III <br> • IV | String | 1 | 18 |
| | APTC Attestation | C | Applicable for initial enrollment and enrollment changes where there is an APTC Applied Amount on any of the enrollment group/policy. <br><br> At least one attestation is required if any applicant APTC eligible as of the Action Effective Date. | Boolean | | |
| **Enrollment Group/Policy Information** <br> Information identifying an enrollment group/policy and the actions to be performed on the enrollment group/policy. This group will repeat for each enrollment group/policy on which one or more actions need to be performed. | | | | | | |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| **Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Request** | | | | | | |
| *Enrollment Group /Policy Identification* | | | | | | |
| | FFE Assigned Policy Number | C | Unique ID assigned by the FFM for the policy covering the enrollment group. Required for all enrollment transactions except initial enrollments. Optional on initial enrollments. | String | 1 | 50 |
| | Issuer Policy Number | C | Unique ID assigned by the Issuer for the policy covering the enrollment group. Will be required for all transactions except initial enrollments. Optional for initial enrollments. | String | 1 | 50 |
| | Start Date | R | Effective date on which coverage will commence under the policy. | Date | 10 | 32 |
| | End Date | C | Effective date on which coverage under the existing policy will end. Required for disenrollment and cancellation. Not applicable for new enrollments or enrollment changes. | Date | 10 | 32 |
| | Issuer ID | R | Issuer ID for the Policy. | String | 5 | 5 |
| | Assigned Plan ID | R | Assigned QHP ID for the policy. | String | 16 | 16 |
| *Transaction Type* | | | | | | |

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| Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Request | | | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | Transaction Type | R | • E - Enrollment (Initial Enrollment/ New Policy) <br> • C - Change (Add/Remove a member, change in Premium, APTC/CSR) <br> • D - Disenrollment (Terminating a Policy) <br> • X - Cancellation (Cancelling a policy before it becomes effective) | String | 1 | 1 |
| **Member Actions (For each applicant seeking health coverage within the enrollment group/policy)** <br> Information on a member of the enrollment group/policy for whom one or more actions need to be performed. This set of data elements will be repeated for each member in the enrollment group/policy with an action necessary. In case of a new enrollment group , all members of the enrollment group will be included. | | | | | | |
| *Member Identifier* | | | | | | |
| | FFE Assigned Applicant ID | R | Unique identifier for the applicant within the household returned by the FFM. | Integer | 1 | 10 |
| | Issuer Assigned Member ID | C | Unique ID assigned by the Issuer of the policy for the member. <br> Required all transactions except initial enrollments. <br> Optional on initial enrollments. | String | 1 | 50 |
| | FFE Assigned Member ID | C | Unique ID assigned to each member enrolled with an Issuer. This ID is unique for an individual within the context of an Issuer. <br> Will be required all transactions except initial enrollments. <br> Optional on initial enrollments (would only be applicable on initial enrollments if the member is enrolling in a QHP with the same Issuer). | String | 1 | 50 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | | | **Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Request** | | | |
| | Subscriber Indicator | C | Indicator for whether the applicant is the subscriber.<br>Y - Yes<br>N - No<br>Only one Applicant per enrollment group within the request can be the subscriber (Y). All other applicants in the enrollment group will need to have N.<br>For initial enrollments one applicant within the enrollment is required to be the Subscriber. Subscriber indicator is not applicable on other transaction types. | Boolean | | |
| | Relationship to Subscriber | R | Code indicating the relationship of this member to the subscriber.<br>See Appendix A.1 Relationship Codes for list of valid values. | String | 2 | 2 |
| | Tobacco Use Indicator | C | Indicator to whether the member currently uses Tobacco products or has used Tobacco products in the past.<br>N - Not a Tobacco user<br>Y - Yes, a Tobacco user<br><br>Required on initial enrollment for all applicants in the enrollment group. Also required for new members to an existing enrollment group on an enrollment change. | String | 1 | 1 |
| | Last date of Tobacco Use | C | Last date on which the applicant used tobacco products.<br>Required when "Tobacco Use Indicator" is "Y". | Date | 10 | 32 |

| | | | **Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Request** | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | Enrollment Period Type | C | Enrollment period to be used for the applicant in case of addition to the enrollment group. I - Initial Enrollment Period A - Annual Enrollment Period S - Special Enrollment Period<br><br>Required on initial enrollment for all applicants in the enrollment group. Also required for new members to an existing enrollment group on an enrollment change. | String | 1 | 1 |
| | Type Code | R | Maintenance type of action corresponding to the action being performed on the member. See Maintenance Type Codes (Member Level) for a list of valid values. | String | 3 | 3 |
| | Reason Code | R | Maintenance reason code corresponding to the action being performed on the member. See Appendix A.4 Maintenance Reason Codes for a list of valid values | String | 2 | 2 |
| | Action Effective Date | R | Effective Date for the action. yyyy-mm-dd | Date | 08 | 32 |
| *Premium Information* | | | | | | |
| | Rating Area | R | Identifies a specific geographic rating area as defined by a State | Integer | 1 | 3 |
| | Total Premium Amount | R | Total premium amount for the enrollment group/policy. | Amount | | |

| | | | Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Request | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | APTC Elected % | C | Percent of the maximum APTC elected by the consumer to apply towards premium costs.<br><br>Required if any member of the enrollment group/policy is APTC eligible as of the Action Effective Date. | Double | | |
| | APTC Applied Amount | C | Total amount of APTC applied to the enrollment group/policy.<br><br>Required if any member of the enrollment group/policy is APTC eligible as of the Action Effective Date. | Amount | | |
| | Total Individual Responsibility Amount | R | Net premium amount (after applying the APTC amount applied) that will be paid by the consumer for the enrollment group/policy. | Amount | | |
| | CSR Level Applicable | R | Cost Sharing Reduction Level applicable to the enrollment group/policy. Please note that if members of the enrollment group/policy are eligible for different CSR levels, the least beneficial CSR Level will be applied to the enrollment group/policy. | String | 2 | 2 |

## 7.3.2.4. Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Response

Table 11 provides the data elements for FFM's response to a partner's enrollment submission request.

**Table 11 - Submit Enrollment/Change/Disenrollment Transaction - Response**

| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Response ||||||||
| **Partner/ Consumer Identification** | | | | | | |
| | Information Exchange System ID | R | Unique Identifier assigned to the Partner Website by the Federal Data Services Hub as part of the onboarding process for the partner | String | 1 | 32 |
| | State Exchange Code | R | Code indicating the specific state instance of the FFM on which eligibility was determined. 2 Character State Abbreviation followed by a digit. The last position will always be '0'. | String | 3 | 3 |
| | Partner Assigned Consumer ID | R | Unique Identifier assigned by Partner Website for the consumer for interacting with the FFM. | String | 1 | 32 |
| | FFE Assigned Consumer ID | R | Unique Identifier assigned by the FFM for the consumer's eligibility determination interaction. | String | 1 | 32 |
| **Enrollment Group/Policy Information** Information identifying an enrollment group/ policy (the enrollment group would be issued as a policy upon acceptance of the enrollment group by the FFM) and the actions performed on the enrollment group/policy. This group will repeat for each enrollment group/policy on which one or more actions were performed. | | | | | | |
| *Enrollment Group/Policy Identification* | | | | | | |
| | FFE Assigned Policy Number | R | Unique ID assigned by the FFM for the policy covering the enrollment group. | String | 1 | 50 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | | | **Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Response** | | | |
| | Issuer Policy Number | C | Unique ID assigned by the Issuer for the policy covering the enrollment group. Optional for initial enrollment transactions, required for all other enrollment transaction types. Note: Pending clarification: If Issuer Policy Number is not allowed on the 834 initial enrollment transaction, it will not be accepted by the direct enrollment service for initial enrollments. | String | 1 | 50 |
| | Start Date | R | Effective date on which coverage will commence under the policy. | Date | 10 | 32 |
| | End Date | O | Effective date on which coverage under the policy will end. | Date | 10 | 32 |
| | Issuer ID | R | Issuer ID for the Policy. | String | 5 | 5 |
| | Plan ID | R | Assigned QHP ID for the policy. | String | 16 | 16 |
| *Transaction Information* | | | | | | |
| | Transaction Type | R | • E - Enrollment (Initial Enrollment/ New Policy) <br> • C - Change (Add/Remove a member, change in Premium, APTC/CSR) <br> • D - Disenrollment (Terminating a Policy) <br> • X - Cancellation (Cancelling a policy before it becomes effective) | String | 1 | 1 |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | Transaction Response Code | R | Code indicating acceptance of the transaction or reason for the failure of the transaction (if applicable)<br>• Transaction accepted as submitted<br>• User not permitted to perform enrollment transactions for the consumer's applicants<br>• Subscriber not specified<br>• More than one subscriber in an enrollment group<br>• Invalid Issuer ID<br>• Invalid Plan ID<br>• Invalid Issuer/Plan combination<br>• Invalid Member Information<br>• Incorrect Premium Amount<br>• Incorrect APTC Amount<br>• Elected APTC Exceeds EHB Portion of QHP Premium<br>• Invalid CSR Level for enrollment group/policy<br>• Incorrect CSR Level for enrollment group/policy | String | 5 | 5 |
| | Payment Transaction ID | C | Unique Identifier returned by the FFM to the partner website on successful submission of the enrollment for enrollment into a QHP that accepts online payment. The payment transaction ID should be submitted by the partner to the Issuer if payment is made online so that the Issuer can correlate the online payment submission with the x12-834 enrollment transaction sent by the FFM. | String | 3 | 10 |

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| | Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Response | | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| *Corrected Premium Information* | | | Premium and CSR Information as calculated by the FFM. If there are discrepancies between these calculations and those sent by the Issuer, the transaction will be rejected for the Issuer to resubmit with corrected information. A Partner website has the choice of collecting payment information from the consumer before or after making the Enrollment web service request. However, they should not process the payment till the enrollment transaction has been successfully accepted by the FFM. | | | |
| | Rating Area | C | Identifies a specific geographic rating area as defined by a State. Required when FFM when FFM data validation of the partner enrollment submission determined a correction is needed for this data element. | Integer | 1 | 3 |
| | Total Premium Amount | C | Total premium amount for the enrollment group. Required when FFM when FFM data validation of the partner enrollment submission determined a correction is needed for this data element. | Amount | | |

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| Data Element Group | Data Element | Required(R), Optional(O), Conditional(C) | Description | Data Type | Min Length | Max Length |
|---|---|---|---|---|---|---|
| | APTC Applied Amount | C | Total amount of APTC elected by the consumer for the policy.<br><br>Required when FFM when FFM data validation of the partner enrollment submission determined a correction is needed for this data element. | Amount | | |
| | Total Individual Responsibility Amount | C | Net premium amount (after applying the APTC amount elected) that will be paid by the consumer.<br><br>Required when FFM when FFM data validation of the partner enrollment submission determined a correction is needed for this data element. | Amount | | |
| | Applicable CSR Level | C | • 01 - Exchange variant (no CSR)<br>• 02 - Open to Members of Federally Recognized Tribes below 300%FPL<br>• 03 - Open to Members of Federally Recognized Tribes above 300%FPL<br>• 04 - 73% AV Level Silver Plan CSR<br>• 05 - 87% AV Level Silver Plan CSR<br>• 06 - 94% AV Level Silver Plan CSR<br><br>Required when FFM when FFM data validation of the partner enrollment submission determined a correction is needed for this data element. | String | 2 | 2 |

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| Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Response | | | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| **Member Actions (For each applicant seeking health coverage within the enrollment group/policy)** Information on a member of the enrollment group for whom one or more actions were performed. This group will be repeated for each member in the enrollment group with an action. | | | | | | |
| *Member Identification* | | | | | | |
| | | | | | | |
| | FFE Assigned Applicant ID | R | Unique identifier for the applicant within the household returned by the FFM. | Integer | 1 | 10 |
| | Issuer Assigned Member ID | C | Required on all transactions except initial enrollment, optional otherwise. | String | 1 | 50 |
| | FFE Assigned Member ID | C | Required on all transactions except initial enrollment, optional otherwise. | String | 1 | 50 |
| *Action Details* | | | | | | |
| | Type Code | R | Maintenance type of action corresponding to the action being performed on the member. See Appendix A.3 Maintenance Type Codes (Member Level) for a list of valid codes. | String | 3 | 3 |
| | Reason Code | R | Maintenance reason code corresponding to the action being performed on the member. See Appendix A.4 Maintenance Reason Codes for a list of valid codes | String | 2 | 2 |
| | Action Effective Date | R | Effective Date for the action. yyyy-mm-dd | Date | 10 | 32 |

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| | Submit Enrollment/Change/Disenrollment Transaction (WS.WB.FFE.02) - Response | | | | | |
|---|---|---|---|---|---|---|
| **Data Element Group** | **Data Element** | **Required(R), Optional(O), Conditional(C)** | **Description** | **Data Type** | **Min Length** | **Max Length** |
| | Action Response Code | R | • No Error<br>• Member not on Application<br>• No Available Enrollment Period<br>• Invalid Enrollment Period<br>• Invalid Effective date for Enrollment Period<br>• Invalid Relationship<br>• Invalid Maintenance Reason Code<br>• Invalid Tobacco Use Indicator | String | 10 | 10 |

# Appendix A.    Code Values/ Descriptions

## A.1  Relationship Codes

Table 12 provides a list of relationship codes, code values, and descriptions.

**Table 12 - Relationship Codes**

| Code | Description |
|------|-------------|
| 1 | Spouse |
| 3 | Father or Mother |
| 4 | Grandfather or Grandmother |
| 5 | Grandson or Granddaughter |
| 6 | Uncle or Aunt |
| 7 | Nephew or Niece |
| 8 | Cousin |
| 9 | Adopted Child |
| 10 | Foster Child |
| 11 | Son-in-law or Daughter-in-law |
| 12 | Brother-in-law or Sister-in-law |
| 13 | Mother-in-law or Father-in-law |
| 14 | Brother or Sister |
| 15 | Ward |
| 16 | Stepparent |
| 17 | Stepson or Stepdaughter |
| 18 | Self |
| 19 | Child |
| 23 | Sponsored Dependent |
| 24 | Dependent of a Minor Dependent |
| 25 | Ex-spouse |
| 26 | Guardian |
| 31 | Court Appointed Guardian |
| 38 | Collateral Dependent |
| 53 | Life Partner |
| 60 | Annultant |
| D2 | Trustee |
| G8 | Other Relationship |
| G9 | Other Relative |

## A.2  SEP Reason Code

Table 13 provides a list of SEP reason codes and descriptions.

**Table 13 - SEP Reason Codes**

| Code Values |
| --- |
| Termination of Benefits |
| Marriage |
| Birth |
| Adoption |
| Newly Eligible |
| Exchange Error |
| Dissatisfied with medical care/services rendered |
| Financial Change |
| Change of Location |
| Exceptional Circumstance |

## A.3  Maintenance Type Codes (Member Level)

Table 14 provides a list of member level maintenance type codes and descriptions.

**Table 14 - Member Level Maintenance Type Codes**

| Code | Description |
|------|-------------|
| 001 | Change |
| 021 | Addition |
| 024 | Cancellation or Termination |
| 025 | Reinstatement |
| 099 | Cancel Pending Auto Disenrollment due to loss of APTC/CSR |

## A.4  Maintenance Reason Codes

Table 15 provides a list of maintenance reason codes and descriptions.

**Table 15 - Maintenance Reason Codes**

| Code | Description |
|------|-------------|
| 01 | Divorce |
| 02 | Birth |
| 03 | Death |
| 05 | Adoption |
| 06 | Strike |
| 07 | Termination of Benefits |
| 09 | Consolidation Omnibus Budget Reconciliation Act (COBRA) |
| 10 | Consolidation Omnibus Budget Reconciliation Act (COBRA) Premium Paid |
| 14 | Voluntary Withdrawal |
| 22 | Plan Change |
| 25 | Change in Identifying Data Elements |
| 28 | Initial Enrollment |
| 29 | Benefit Selection |
| 41 | Re-enrollment |
| 43 | Change of Location |
| 59 | Non Payment |
| AI | No Reason Given |
| EC | Member Benefit Selection |

# Appendix B.    Key Interaction Scenarios

## B.1   Scenario #1a - New FFM Consumer (Consumer initiated direct enrollment)

*Figure 3 - New FFM Consumer* illustrates the consumer workflow between the partner website and the FFM.

**Figure 3 - New FFM Consumer**
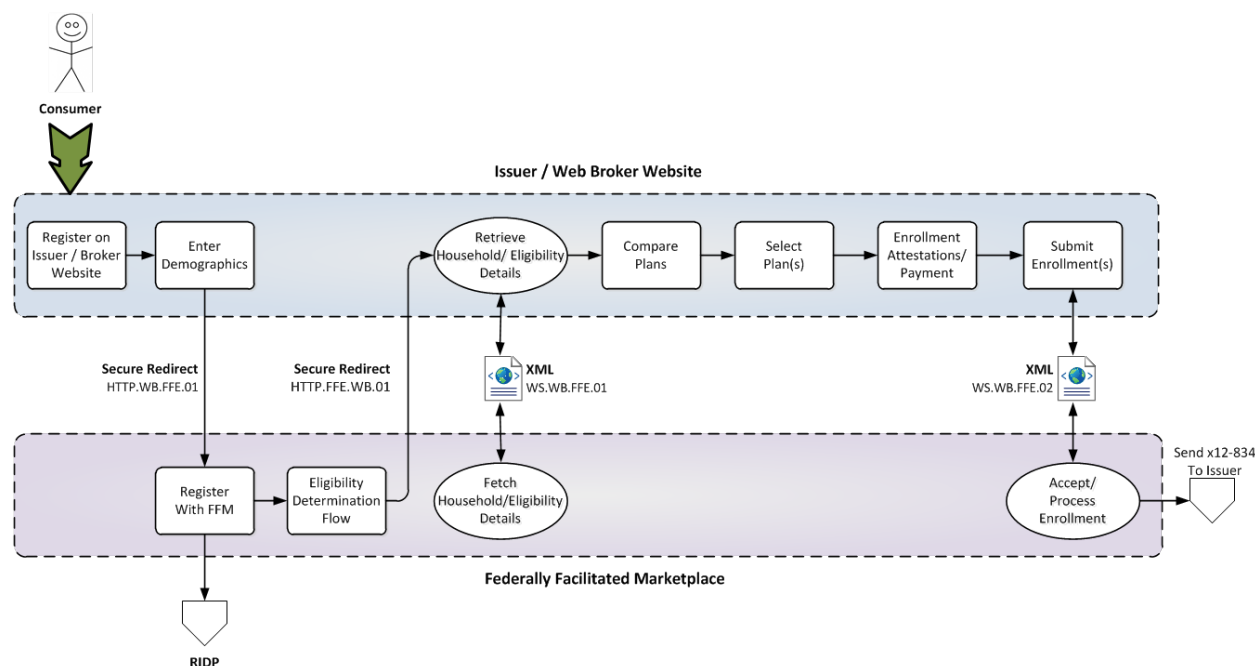


## B.1.1 Scenario Overview

This scenario applies to a new consumer shopping for health insurance on a partner website. As part of the shopping experience, if the consumer decides to shop for a QHP for their health coverage, the partner website will transfer the consumer to the FFM website for determination of eligibility for QHP, with or without financial assistance. After completion of eligibility determination by the FFM, the consumer will be transferred back to the partner website to complete their plan shopping, ultimately resulting in an enrollment under a QHP. The partner website will use its own tools to guide the consumer through QHP shopping and enrollment. The partner website will present the consumer various views of QHPs matching their needs, including information on benefits covered and premium costs. The QHP information presented will reflect Cost Sharing Reductions (CSR) and Advance Premium Tax Credit (APTC) the consumer is eligible for. When the consumer is ready to enroll into a QHP, the partner website will capture enrollment attestations, including those for APTC, and submit an enrollment transaction to the FFM by invoking a web service on the FFM. The partner website may collect payment for the initial premium either prior to submission of the enrollment transaction or after successful submission. The FFM will process the enrollment transaction and generate an x12-834 transaction to notify the Issuer.

## B.1.2 Sequence of Activities

**On Partner Website**
1) Consumer starts their shopping for Health Insurance Coverage
2) If consumer already has an account with the partner website they would login using their credentials for the partner website. Otherwise, consumer may create an Account on the partner website. Note: Depending on the partner website, the account creation step may be performed upfront or after the consumer is transferred back to the partner website after eligibility determination by FFM.
3) Consumer indicates intent to enroll in a QHP, with or without financial assistance for their Health Insurance Coverage
4) Partner website will generate a unique ID for the Consumer referred to as Partner Assigned Consumer ID.
5) Partner website will transfer the consumer to the FFM website for submitting the eligibility application. Information passed to the FFM would include:
   a. Information Exchange System ID - A Unique Identifier assigned to the partner website as part of their onboarding by the Federal Data Services Hub.
   b. Partner Assigned Consumer ID.
   c. Consumer's Contact Information (Optional). If sent, this information will be used to prefill the FFM registration page. This is applicable only to new FFM consumers. The information will be discarded by the FFM for returning consumers.
   d. Return URL - partner website URL to which the consumer will be transferred by FFM on completion of eligibility determination or on consumer's intent to return
   e. Keep-alive URL - partner website URL that the FFM website will ping periodically to keep the partner website session of the consumer active. This is optional and the ping will be performed only if the Keep-alive URL is sent to the FFM as part of the transfer.

**On FFM**
6) Consumer does not already have an account with the FFM.
7) Consumer will create an account on the FFM. The account creation process on the FFM would involve the standard CMS Enterprise Identity Management (EIDM) workflow including Remote Identity Proofing (RIDP)
8) FFM will associate the Consumer's FFM account with the partner website
   - Note 1: A consumer's FFM account may be associated with multiple Partner Websites if they visit the FFM through those websites.
   - Note 2: Each partner website will provide the FFM its own Partner Assigned Consumer ID
   - Note 3: The FFM will generate a separate FFE Assigned Consumer ID for each partner website
   - Note 4: The consumer may disassociate their account from a partner website through the My Account functionality of the FFM

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- Note 5: Consumer may choose to return to the FFM directly and perform their entire shopping on the FFM, including enrollment

9) Consumer fills out an application for QHP enrollment with or without a request for financial assistance. The following information will be collected
   a. Household information - List of household members (Applicants and Non-Applicants) with demographic information
   b. The following information will be collected only if the consumer requested financial assistance
      i. Tax filing status and tax household information
      ii. Other demographic information required for Medicaid/CHIP eligibility
      iii. Income information
      iv. Information on other health coverage

10) FFM will generate the FFE Assigned Consumer ID for the consumer

11) FFM will verify information entered by consumer with internal and external data sources

12) FFM will determine eligibility for QHP for each member of the household seeking health insurance coverage

13) If consumer requested financial assistance, FFM will determine eligibility for Medicaid, CHIP and APTC/CSR
    a. For each applicant eligible for Medicaid or CHIP
       i. FFM will perform an account transfer for the applicant to the State Medicaid/CHIP agency
    b. For applicants not eligible for Medicaid/CHIP, but eligible for APTC and/or CSR
       i. FFM will calculate Maximum APTC and CSR level

14) FFM will transfer the consumer to the Return URL provided by the partner website. The Partner Assigned Consumer ID and FFE Assigned Consumer ID will be sent to the partner website as part of the transfer.

**On Partner Website**

15) Partner website will invoke the FFM Household/Eligibility web service using the FFE Assigned Consumer ID

16) FFM Household/Eligibility Service will return the following information:
    a. Application Contact Information
    b. List of members and demographic Information required for plan shopping and enrollment. This will only include members requesting health insurance coverage (including those referred to Medicaid/CHIP)
    c. Eligibility information for each member of the household
       i. Eligibility for Medicaid/CHIP
       ii. Eligibility for APTC including Maximum Monthly APTC
       iii. Eligibility for CSR and CSR Level
       iv. Eligibility for Enrollment Period - Initial Enrollment Period (IEP), Annual Enrollment Period (AEP) or Special Enrollment Period (SEP).
    d. Enrollment status of members of the household (applicable if a member is enrolled through a different application on the FFM).

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17) The following steps will be performed only if the consumer has submitted their eligibility application on the FFM and determination of eligibility has been completed.

18) For members transferred by FFM to Medicaid/CHIP, partner website will notify consumer and stop processing.

19) For members not eligible for Medicaid/CHIP or QHP, partner website will notify consumer and may guide them through their commercial plan shopping experience (non-QHPs). There will be no further interaction with the FFM for those applicants.

20) The remaining steps on the partner website apply only if one or more members are eligible for QHP, with or without eligibility for APTC and/or CSR and also eligible for an enrollment period (IEP, AEP or SEP).
   - Note: Based on eligibility for an enrollment period of a household member, other members enrolled in a QHP with that member may also be eligible to change plans.

21) Consumer goes through shopping experience for QHPs
   a. Partner website will allow consumer to form enrollment Groups within the household including one or more members in each enrollment group. Multiple enrollment groups would allow members of the household to enroll in different QHPs more suitable to their respective needs. Multiple enrollment groups will also be necessary in situations where a QHP would not accept all members in a single enrollment group (policy) based on residency or their relationship to the subscriber.
   b. Consumer may specify criteria including Plan Metal level, and premium cost to search and compare plans

22) At the end of the QHP shopping experience, the consumer will select a QHP for each of the enrollment groups

23) Consumer will complete attestations required for enrollment including those for APTC and CSR

24) Consumer submits the enrollment request

25) Partner website will invoke a FFM Enrollment web service to submit the enrollment request. FFM will validate and process the enrollment transaction. If the transaction fails validation checks, FFM will return an exception. Otherwise, FFM will return an enrollment transaction ID.

26) For successful enrollment transactions, partner website may collect payment information for the initial premium.

27) Partner website may guide consumer through other product shopping options

**On FFM (No consumer interaction)**

28) FFM will complete processing of the QHP enrollment transaction(s)

29) For each enrollment group, FFM will generate an x12-834 transaction for initial enrollment and transmit to the Issuer of the QHP
   - Note 1: The Agent/Broker information sent by the partner website as part of the enrollment transaction will be listed as the agent/broker on the x12-834 transaction for compensation purposes
   - Note 2: If a consumer returns to the FFM directly and performs their enrollment on the FFM, none of the partner websites through which

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they had previously visited the FFM will be included on the x12-834
transaction

## B.2 Scenario #1b - New FFM Consumer (Agent/Broker Initiated Direct Enrollment)

*Figure 3 - New FFM Consumer* illustrates the agent/broker assisted workflow between the partner website and the FFM.

**Figure 4 - New FFM Consumer (Agent/Broker Initiated Direct Enrollment)**
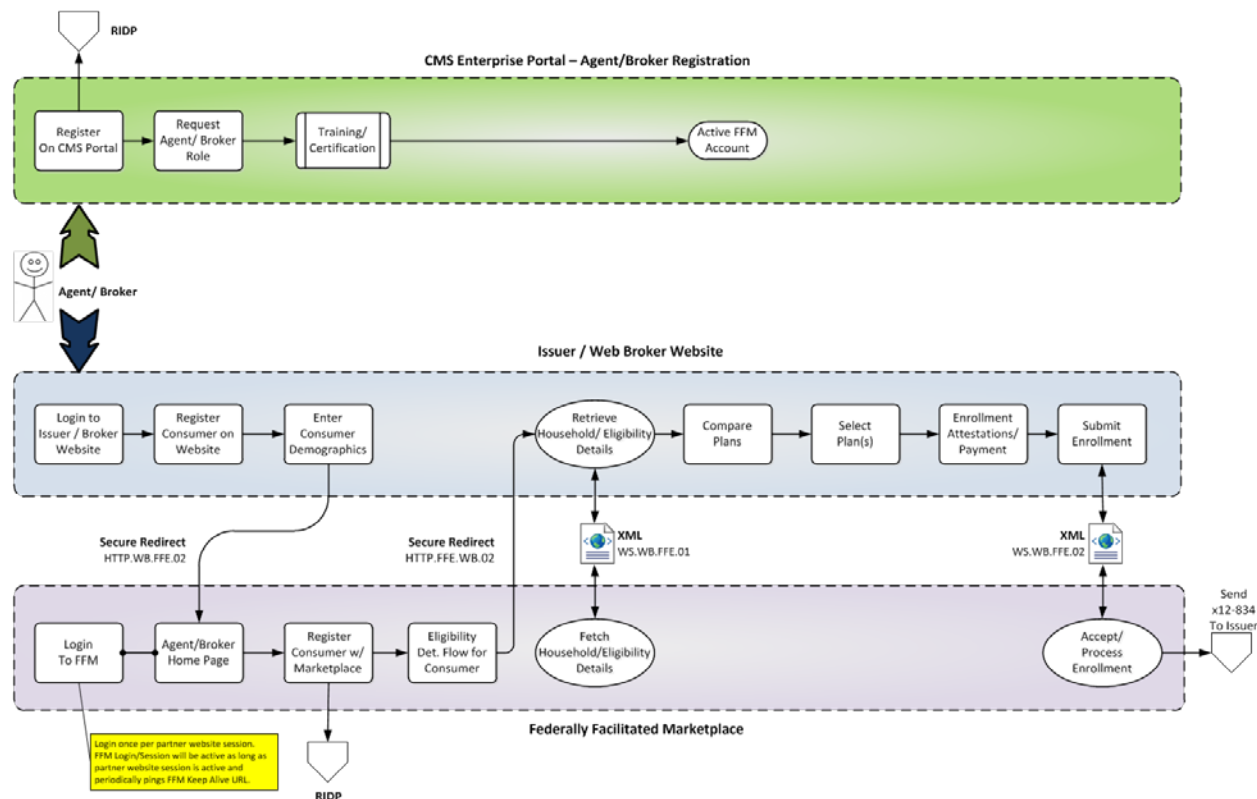


## B.2.1 Scenario Overview

This scenario applies to a new consumer shopping for health insurance on a partner website via an agent/broker. Prior to being able to assist consumer, agents/brokers would have to completed registration with the FFM, depicted above in the "CMS Enterprise Portal – Agent/Broker Registration" section. Outside of the FFM, agents/brokers would also need to establish access to partner website tools as agent/brokers. See Section 3.2.2.1 Registration for more details on agent/broker prerequisites for assisting FFM consumers.

As part of the agent/broker assisted shopping experience, if the consumer decides to shop for a QHP for their health coverage, the partner website will transfer the agent/broker to the FFM website for determination of eligibility for QHP for the consumer, with or without financial assistance. After completion of eligibility determination by the FFM, the agent/broker will be transferred back to the partner website to complete the consumer's plan shopping, ultimately resulting in an enrollment under a QHP. The partner website will use its own tools to guide the agent/broker through QHP shopping and enrollment. The agent/broker, using the partner website, will present the consumer various views of QHPs matching their needs, including information on benefits covered and premium costs. The QHP information presented will reflect Cost Sharing

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Reductions (CSR) and Advance Premium Tax Credit (APTC) the consumer is eligible for. When the consumer is ready to enroll into a QHP, the agent/broker will use the partner website to capture enrollment attestations, including those for APTC, and submit an enrollment transaction to the FFM by invoking a web service on the FFM. The agent/broker may use the partner website to collect payment for the initial premium either prior to submission of the enrollment transaction or after successful submission, according to the partner's procedures. The FFM will process the enrollment transaction and generate an x12-834 transaction to notify the Issuer.

## B.2.2 Sequence of Activities

**On Partner Website**
1) Agent/Broker starts the shopping for Health Insurance Coverage for a consumer on the partner website.
2) Consumer indicates intent to enroll in a QHP, with or without financial assistance for their Health Insurance Coverage
3) Partner website will generate a unique ID for the Consumer referred to as Partner Assigned Consumer ID.
4) Partner website will transfer the agent/broker to the FFM website for submitting the consumer's eligibility application. Information passed to the FFM would include:
    a. Information Exchange System ID - A Unique Identifier assigned to the partner website as part of their onboarding by the Federal Data Services Hub.
    b. FFM User ID - The agent/broker's user ID assigned by the FFM.
    c. Partner Assigned Consumer ID.
    d. Consumer's Contact Information (Optional). If sent, this information will be used to prefill the FFM registration page. This is applicable only to new FFM consumers. The information will be discarded by the FFM for returning consumers.
    e. Return URL - partner website URL to which the agent/broker will be transferred by FFM on completion of eligibility determination or on agent/broker's intent to return.
    f. Keep-alive URL - partner website URL that the FFM website will ping periodically to keep the partner website session of the agent/broker active. This is optional and the ping will be performed only if the Keep-alive URL is sent to the FFM as part of the transfer.

**On FFM**
5) Consumer does not already have an account with the FFM.
6) Agent/broker will create an account on the FFM for the consumer as the first step in the application process which would involve a portion of the standard CMS Enterprise Identity Management (EIDM) workflow for Remote Identity Proofing (RIDP). Note: the account creation performed by the agent/broker will exclude creation of an online User ID and password for the consumer which the consumer would need to perform themselves on the FFM directly.
7) FFM will associate the Consumer's FFM account with the partner website
    • Note 1: A consumer's FFM account may be associated with multiple Partner Websites if they visit the FFM through those websites.

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- Note 2: Each partner website will provide the FFM its own Partner Assigned Consumer ID
- Note 3: The FFM will generate a separate FFE Assigned Consumer ID for each partner website
- Note 4: The consumer may disassociate their account from a partner website through the My Account functionality of the FFM
- Note 5: Consumer may choose to return to the FFM directly and perform their entire shopping on the FFM, including enrollment. If the consumer were to choose to do so, the consumer would need to register themselves with the FFM for the purposes of establishing a User ID and password via the standard CMS EIDM workflow including RIDP. Once the consumer established their direct online access to the FFM, the consumer would be able to see the information they had submitted to the FFM via the agent/broker.

8) Working with the consumer, the agent/broker completes an application for QHP enrollment with or without a request for financial assistance. The following information will be collected
   a. Household information - List of household members (Applicants and Non-Applicants) with demographic information
   b. The following information will be collected only if the consumer requested financial assistance
      i. Tax filing status and tax household information
      ii. Other demographic information required for Medicaid/CHIP eligibility
      iii. Income information
      iv. Information on other health coverage
9) FFM will generate the FFE Assigned Consumer ID for the consumer
10) FFM will verify information entered by consumer with internal and external data sources
11) FFM will determine eligibility for QHP for each member of the household seeking health insurance coverage
12) If consumer requested financial assistance, FFM will determine eligibility for Medicaid, CHIP and APTC/CSR
    a. For each applicant eligible for Medicaid or CHIP
       i. FFM will perform an account transfer for the applicant to the State Medicaid/CHIP agency
    b. For applicants not eligible for Medicaid/CHIP, but eligible for APTC and/or CSR
       i. FFM will calculate Maximum APTC and CSR level
13) FFM will transfer the agent/broker to the Return URL provided by the partner website. The Partner Assigned Consumer ID and FFE Assigned Consumer ID will be sent to the partner website as part of the transfer.

**On Partner Website**
14) Partner website will invoke the FFM Household/Eligibility web service using the FFE Assigned Consumer ID
15) FFM Household/Eligibility Service will return the following information:
    a. Application Contact Information

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    b. List of members and demographic Information required for plan shopping and enrollment. This will only include members requesting health insurance coverage (including those referred to Medicaid/CHIP)

    c. Eligibility information for each member of the household
      i. Eligibility for Medicaid/CHIP
      ii. Eligibility for APTC including Maximum Monthly APTC
      iii. Eligibility for CSR and CSR Level
      iv. Eligibility for Enrollment Period - Initial Enrollment Period (IEP), Annual Enrollment Period (AEP) or Special Enrollment Period (SEP).

    d. Enrollment status of members of the household (applicable if a member is enrolled through a different application on the FFM).

16) The following steps will be performed only if the consumer eligibility application has been submitted on the FFM and determination of eligibility has been completed.

17) For members transferred by FFM to Medicaid/CHIP, partner website will notify consumer and stop processing.

18) For members not eligible for Medicaid/CHIP or QHP, partner website will notify consumer and may guide them through their commercial plan shopping experience (non-QHPs). There will be no further interaction with the FFM for those applicants.

19) The remaining steps on the partner website apply only if one or more members are eligible for QHP, with or without eligibility for APTC and/or CSR and also eligible for an enrollment period (IEP, AEP or SEP).

    • Note: Based on eligibility for an enrollment period of a household member, other members enrolled in a QHP with that member may also be eligible to change plans.

20) Agent/broker assists the consumer goes through shopping experience for QHPs

    a. Partner website will allow forming enrollment groups within the household including one or more members in each enrollment group. Multiple enrollment groups would allow members of the household to enroll in different QHPs more suitable to their respective needs. Multiple enrollment groups will also be necessary in situations where a QHP would not accept all members in a single enrollment group (policy) based on residency or their relationship to the subscriber.

    b. Working with the agent/broker, the Consumer may specify criteria including Plan Metal level, and premium cost to search and compare plans

21) At the end of the QHP shopping experience, the agent/broker will gather the consumer selections of a QHP for each of the enrollment groups

22) Agent/broker gathers from the consumer the attestations required for enrollment including those for APTC and CSR

23) Agent/broker submits the enrollment request

24) Partner website will invoke a FFM Enrollment web service to submit the enrollment request. FFM will validate and process the enrollment transaction. If the transaction fails validation checks, FFM will return an exception. Otherwise, FFM will return an enrollment transaction ID.

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25) For successful enrollment transactions, partner website may collect payment information for the initial premium.

26) Partner website may guide consumer through other product shopping options

**On FFM (No consumer interaction)**

27) FFM will complete processing of the QHP enrollment transaction(s)

28) For each enrollment group, FFM will generate an x12-834 transaction for initial enrollment and transmit to the Issuer of the QHP

- Note 1: The Agent/Broker information sent by the partner website as part of the enrollment transaction will be listed as the agent/broker on the x12-834 transaction for compensation purposes

- Note 2: If a consumer returns to the FFM directly and performs their enrollment on the FFM, none of the partner websites through which they had previously visited the FFM will be included on the x12-834 transaction

## B.3    Scenario #1c - New FFM Consumer (Consumer initiated lead generation)

*Figure 3 - New FFM Consumer* illustrates the consumer workflow between the partner website and the FFM in the lead generation model.

**Figure 5 - New FFM Consumer (Lead Generation)**
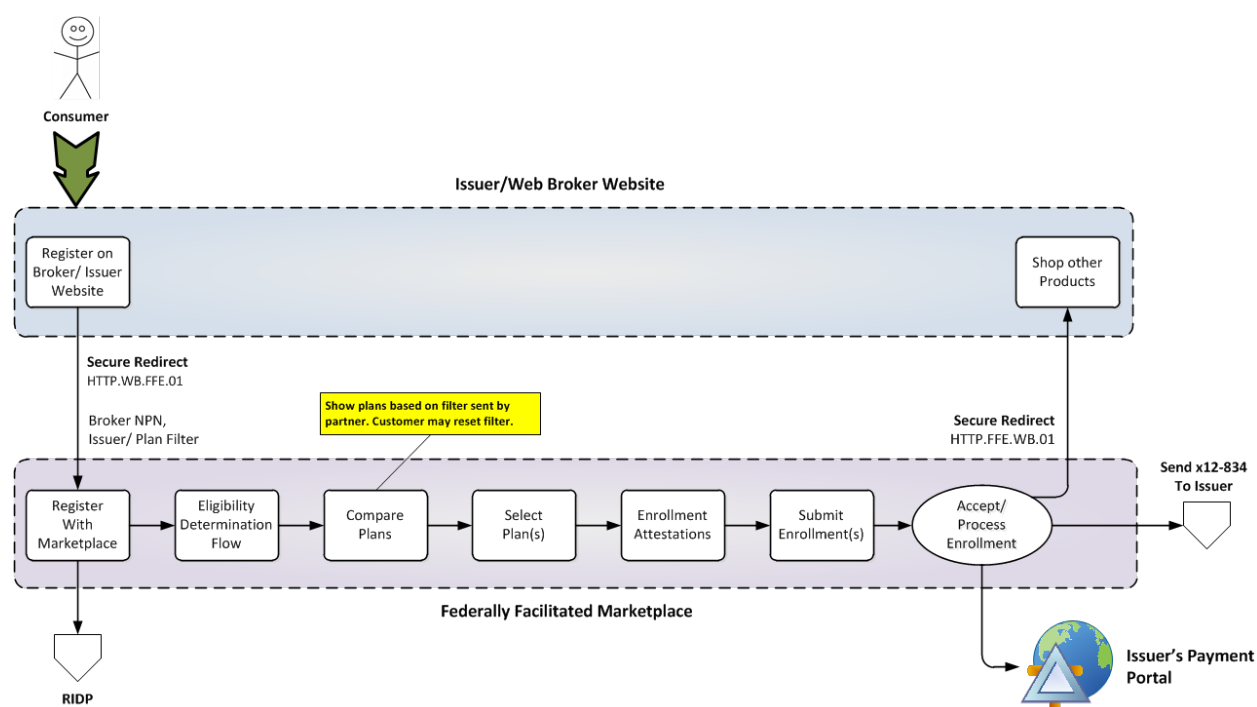


### B.3.1    Scenario Overview

This scenario applies to consumers shopping for health insurance on a partner website. As part of the shopping experience, if the consumer decides to shop for a QHP for their health coverage, the partner website will transfer the consumer to the FFM website for determination of eligibility for QHP, with or without financial assistance. If the partner website is choosing to do lead generation rather than direct enrollment, after completion of eligibility determination by the FFM, the consumer will not be transferred back to the partner website to complete their plan shopping. The FFM rather than the partner website will guide the consumer through QHP shopping and enrollment including capturing enrollment attestations, and generating an x12-834 transaction to notify the Issuer. If the partner website supplied a filter for the Issuers/plans to display, FFM will default the plan results to be filtered accordingly, but the consumer will have the choice to remove the filter. If the partner website supplied a return URL as part of the lead generation, the FFM will transfer the consumer back to the partner website after enrollment submission.

### B.3.2    Sequence of Activities

**On Partner Website**
1) Consumer starts their shopping for Health Insurance Coverage
2) If consumer already has an account with the partner website they would login using their credentials for the partner website. Otherwise, consumer

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> may create an Account on the partner website. <u>Note:</u> Depending on the partner website, the account creation step may be performed upfront or after the consumer is transferred back to the partner website after enrollment by FFM.

3) Consumer indicates intent to enroll in a QHP, with or without financial assistance for their Health Insurance Coverage

4) Partner website will generate a unique ID for the Consumer referred to as Partner Assigned Consumer ID.

5) Partner website will transfer the consumer to the FFM website for submitting the eligibility application and enrollment. Information passed to the FFM would include:

   a. Information Exchange System ID - A Unique Identifier assigned to the partner website as part of their onboarding by the Federal Data Services Hub.

   b. Partner Assigned Consumer ID.

   c. Consumer's Contact Information (Optional). If sent, this information will be used to prefill the FFM registration page. This is applicable only to new FFM consumers. The information will be discarded by the FFM for returning consumers.

   d. Return URL - partner website URL to which the consumer will be transferred by FFM on completion of eligibility determination or on consumer's intent to return

   e. Keep-alive URL - partner website URL that the FFM website will ping periodically to keep the partner website session of the consumer active. This is optional and the ping will be performed only if the Keep-alive URL is sent to the FFM as part of the transfer.

   f. NPN – The national producer number to be submitted with the resulting enrollment(s) where the consumer selected to enroll in plan that meets the Plan Results Filter criteria.

   g. Plan Results Filter – The default filter of up to ten Issuer IDs or QHP IDs to filter the plan results in FFM for the consumer.

**On FFM**

6) Consumer does not already have an account with the FFM.

7) Consumer will create an account on the FFM. The account creation process on the FFM would involve the standard CMS Enterprise Identity Management (EIDM) workflow including Remote Identity Proofing (RIDP)

8) FFM will associate the Consumer's FFM account with the partner website

   - <u>Note 1:</u> A consumer's FFM account may be associated with multiple Partner Websites if they visit the FFM through those websites.

   - <u>Note 2:</u> Each partner website will provide the FFM its own Partner Assigned Consumer ID

   - <u>Note 3:</u> The FFM will generate a separate FFE Assigned Consumer ID for each partner website

   - <u>Note 4:</u> The consumer may disassociate their account from a partner website through the My Account functionality of the FFM

   - <u>Note 5:</u> Consumer may choose to return to the FFM directly and perform their entire shopping on the FFM, including enrollment

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9) Consumer fills out an application for QHP enrollment with or without a request for financial assistance. The following information will be collected
   a. Household information - List of household members (Applicants and Non-Applicants) with demographic information
   b. The following information will be collected only if the consumer requested financial assistance
      i. Tax filing status and tax household information
      ii. Other demographic information required for Medicaid/CHIP eligibility
      iii. Income information
      iv. Information on other health coverage
10) FFM will generate the FFE Assigned Consumer ID for the consumer
11) FFM will verify information entered by consumer with internal and external data sources
12) FFM will determine eligibility for QHP for each member of the household seeking health insurance coverage
13) If consumer requested financial assistance, FFM will determine eligibility for Medicaid, CHIP and APTC/CSR
    a. For each applicant eligible for Medicaid or CHIP
       i. FFM will perform an account transfer for the applicant to the State Medicaid/CHIP agency
    b. For applicants not eligible for Medicaid/CHIP, but eligible for APTC and/or CSR
       i. FFM will calculate Maximum APTC and CSR level
14) Consumer goes through shopping experience for QHPs, with the plan results default filtered by the filter provided by the partner, if applicable. If no plan results are returned due to the filter or if the consumer voluntarily chooses to do so, the filter can be removed on the FFM to allow the consumer to view all plans on the FFM that their household members can choose.
15) If partner website provided a return URL, FFM transfers the consumer back to the partner website. The Partner Assigned Consumer ID and FFE Assigned Consumer ID will be sent to the partner website as part of the transfer.
16)

**On the Partner Website**

17) Partner website may guide consumer through other product shopping options
18)

**On FFM (No consumer interaction)**

19) FFM will complete processing of the QHP enrollment transaction(s)
20) For each enrollment group, FFM will generate an x12-834 transaction for initial enrollment and transmit to the Issuer of the QHP
    - Note 1: The Agent/Broker information sent by the partner website as part of the enrollment transaction will be listed as the agent/broker on the x12-834 transaction for compensation purposes
    - Note 2: If a consumer returns to the FFM directly and performs their enrollment on the FFM, none of the partner websites through which
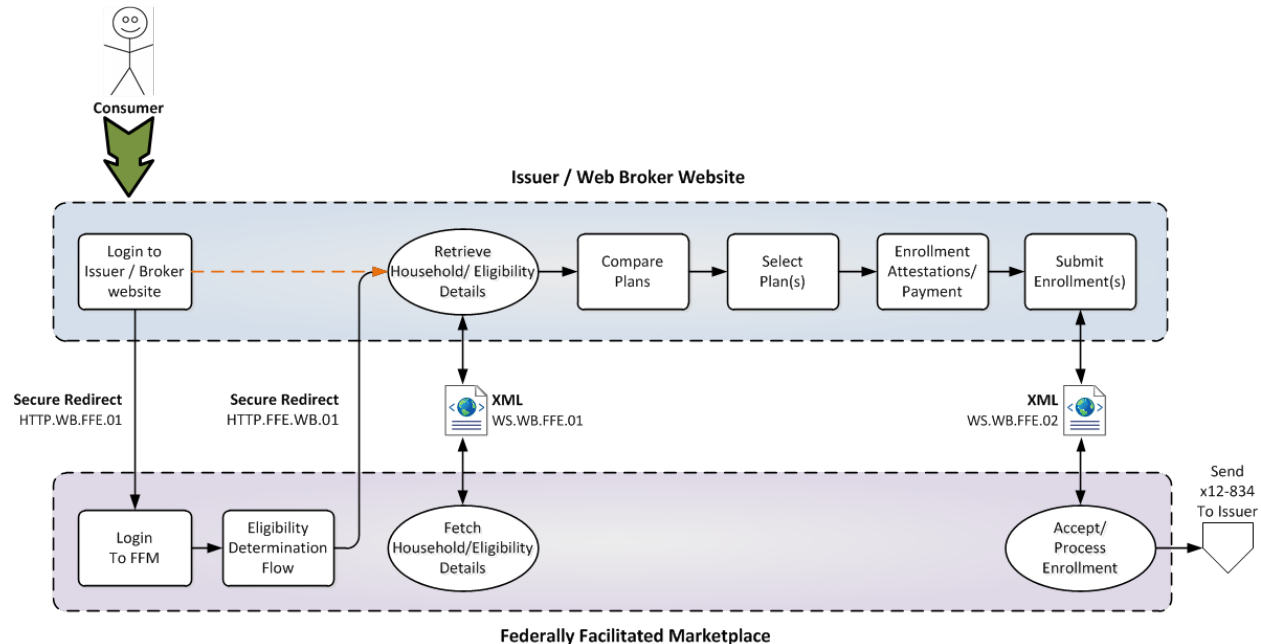
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they had previously visited the FFM will be included on the x12-834
transaction

## B.4    Scenario #2 - Returning FFM Consumer

*Figure 6 - Returning FFM Consumer* illustrates the interaction between the Partner Website and the FFM under this scenario.

**Figure 6 - Returning FFM Consumer**



### B.4.1    Scenario Overview

This scenario is an extension of Scenario #1. This applies if in Scenario #1, the consumer stops prior to enrollment and returns later to continue shopping. This also applies to other previously registered FFM consumers (either directly on the FFM or through another partner website) accessing the partner website. The consumer may continue their eligibility application from the last step during their previous interaction with the FFM website. The partner website will reuse the previously generated Partner Assigned Consumer ID (if the consumer previously registered with them) or generate a new Partner Assigned Consumer ID. The Partner Assigned Consumer ID along with the FFE Assigned Consumer ID (if available) will be used in all interactions with the FFM.

### B.4.2    Sequence of Activities

The sequence of activities will be the same as for Scenario #1 with the following considerations

**On Partner Website**
- If the consumer returns to the same partner website, account creation would have been completed in the prior session. The consumer will need to login using their credentials for the partner website.
- If the consumer goes to a different partner website or initially registered on the FFM and goes to a partner website, they would need to create an account on the partner website. The partner website would generate a Partner Assigned Consumer ID. The consumer would also need to login to the FFM (regardless of if they already completed eligibility application on

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the FFM or not) to complete the association between the partner website and the FFM.

- Partner Assigned Consumer ID and FFE Assigned Consumer ID (if available) will be used in interactions with the FFM
- Consumer will resume the process at the last step they were at during the prior session but will be able move to prior steps subject to workflow rules of the partner website
- Consumer will be able to retrieve QHPs or QHP lists saved during a previous session on the partner website

**On FFM**
- Account creation would have been completed in the prior session. The consumer will login using their credentials for the FFM. There will not be a need for the EIDM/RIDP workflow.
- If the consumer is transferred by a partner website that has not previously interacted with the FFM for this consumer, FFM will generate a FFE Assigned Consumer ID for this consumer/ partner website.
- Partner Assigned Consumer ID and FFE Assigned Consumer ID will be used in interactions with the partner website
- Consumer will resume the process at the last step they were at during the prior session, but can move to prior steps subject to the application workflow rules of the FFM
- Consumer may also return directly to the FFM and continue/complete their entire shopping experience on the FFM

## B.5    Scenario #3 - Reporting Changes Impacting Eligibility

*Figure 7 - Reporting Changes Impacting Eligibility* illustrates the interaction between the Partner Website and FFM under this scenario.

### Figure 7 - Reporting Changes Impacting Eligibility
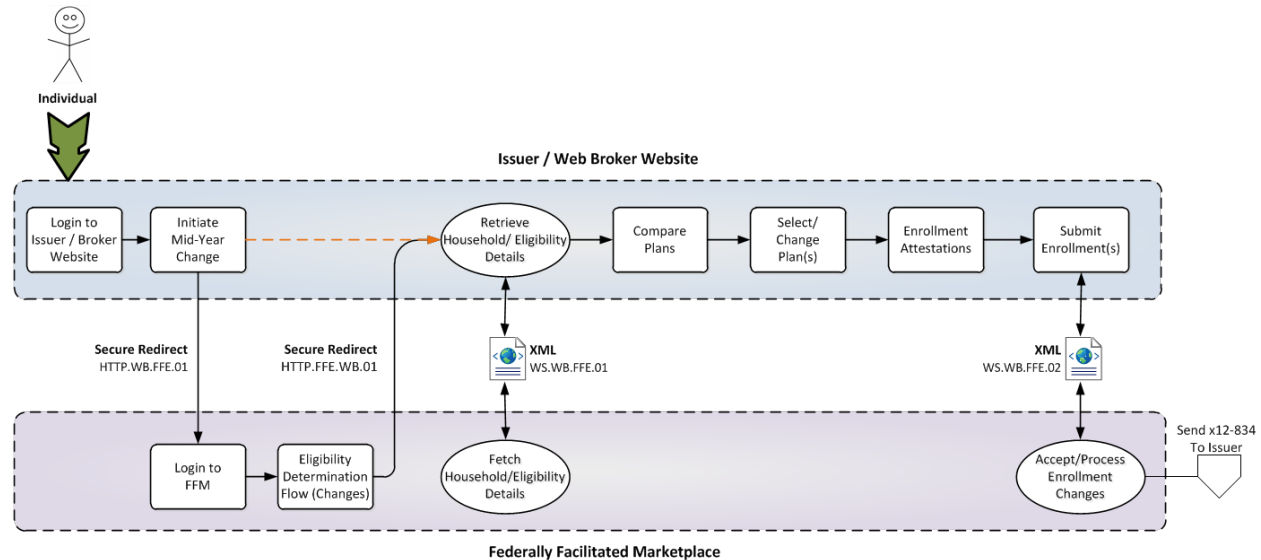


### B.5.1 Scenario Overview

In this scenario, a consumer with a household previously enrolled in a QHP with or without APTC/CSR returns to report changes in their household membership, income or other demographic information. The changes impact their eligibility for QHP or APTC/CSR. The changes in eligibility may allow the consumer to add a new member, or change enrollments of one or more members to a new QHP that is more favorable to their current eligibility.

### B.5.2 Sequence of Activities

#### On Partner Website
1)    Consumer and/or members of their household are enrolled in a QHP.
2)    Consumer may or may not have an account on the partner website. If they do not have an account on the partner website, they would create one. Otherwise, they would login using their credentials for the partner website.
3)    Consumer indicates intent to report changes to demographic/household information for an FFM enrollment
4)    Partner website transfers consumer to the FFM website. Information passed to the FFM includes:
    a.   Information Exchange System ID
    b.   Partner Assigned Consumer ID
    c.   FFE Assigned Consumer ID
    d.   Return URL
    e.   Keep-alive URL

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**On FFM**

5) Consumer already has an account with the FFM and will login using FFM credentials

6) Consumer reviews their account/application details on the FFM and enters changes where applicable. Changes could include:
   a. Contact Information
   b. Addition or removal of household members
   c. Change in request for financial assistance
   d. Changes in household income
   e. Changes in availability of other health coverage (employer sponsored or other public programs)
   f. Residency changes
   g. Other Demographic changes

7) FFM will verify information entered by consumer with internal and external data sources

8) FFM will determine eligibility for Medicaid, CHIP and APTC/CSR (if consumer requested financial assistance)
   a. For each applicant eligible for Medicaid or CHIP and not previously transferred to the state agency
      i. FFM will perform an account transfer for the applicant to the State Medicaid/CHIP agency
   b. For applicants not eligible for Medicaid/CHIP, but eligible for APTC and/or CSR
      i. FFM calculates Maximum APTC and CSR level

9) FFM transfers consumer to the Return URL provided by partner website and passes back the Partner Assigned Consumer ID and FFE Assigned Consumer ID

**On Partner Website**

10) Partner website invokes the FFM Household/Eligibility web service using the FFE Assigned Consumer ID

11) partner website receives following information from the FFM Household/ Eligibility web service
   a. Application Contact Information
   b. List of members and demographic Information required for plan shopping and enrollment. This will only include members requesting health insurance coverage (including those referred to Medicaid/CHIP)
   c. Eligibility information for each member of the household including the eligibility history for the past 6 months
      i. Eligibility for Medicaid/CHIP
      ii. Eligibility for APTC including Maximum Monthly APTC
      iii. Eligibility for CSR and CSR Level
      iv. Eligibility for Enrollment Period - Initial Enrollment Period (IEP), Annual Enrollment Period (AEP) or Special Enrollment Period (SEP).
      v. Flag indicating if a member has gained or lost eligibility for QHP and or APTC/CSR
   d. Enrollment status of members of the household including enrollments in the prior 6 months and prospective enrollment.

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12) For members transferred by FFM to Medicaid/CHIP during current interaction,
   a. Partner website will notify consumer on eligibility for Medicaid or CHIP and ineligibility for APTC/CSR.
   b. If the member is newly added, partner website will stop processing applicant
      • The consumer may still be able to enroll the member in a QHP without APTC or CSR
   c. If the member is already enrolled in a QHP, the partner website will follow the process outlined in Scenario #5 - Reporting changes leading to Disenrollment.

13) Members previously eligible for APTC/CSR but lost eligibility due to changes reported during the current interaction, will be handled per process outlined in Scenario #5 - Reporting changes leading to Disenrollment

14) For members not eligible for any financial assistance (Medicaid/CHIP, APTC and CSR), partner website may present the following options to the consumer
   a. Add member to a QHP enrollment (based on SEP) without APTC or CSR
   b. Shop for non-exchange plans offered by the partner website.

15) The remaining steps on the partner website apply only if one or more members are eligible for a QHP, with or without eligibility for APTC and/or CSR and also eligible for an enrollment period (IEP, AEP or SEP).
   • Note: Based on eligibility for an enrollment period of a household member, other members enrolled in a QHP with that member may also be eligible to change plans.

16) Consumer goes through shopping experience for QHPs
   a. Partner website will allow consumer to add a new member to an existing enrollment Group or reorganize enrollment groups (including creating new enrollment groups) with one or more members in each enrollment group.
   b. Consumer may specify criteria including Plan Metal level, and premium cost to search and compare plans

17) At the end of the QHP shopping experience, the consumer may select a new QHP for an existing enrollment group that includes members eligible for an enrollment period or select a QHP for new enrollment groups.

18) Consumer will complete attestations required for enrollment including those for APTC and CSR

19) Consumer submits the enrollment request

20) Partner website will invoke the FFM Enrollment web service to submit the enrollment request. FFM will validate and process the enrollment transaction. If the transaction fails validation checks, FFM will return an exception. Otherwise, FFM will return the enrollment transaction ID.

21) Partner website may collect the initial premium for any new enrollment groups or enrollment groups that have changed QHPs.

22) Partner website may guide consumer through other product shopping options

**On FFM (No Consumer Interaction)**

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23) For any existing enrollment groups that a member is added to or removed from
   a. FFM will process QHP enrollment change transaction to add/remove members
   b. FFM will generate x12-834 enrollment change transaction and transmit to the Issuer of the policy

24) For any existing enrollment groups from which all members have be removed
   a. FFM will process a QHP disenrollment from the QHP (policy level)
   b. FFM will generate an x12-834 cancellation/termination transaction for the QHP and transmit to the Issuer of the policy

25) For any existing enrollment groups for which the plan has been changed.
   a. FFM will process a QHP disenrollment from the old QHP (policy level)
   b. FFM will generate an x12-834 cancellation/termination transaction for the old QHP and transmit to the Issuer of the policy
   c. FFM will process a QHP Initial Enrollment from the new QHP
   d. FFM will generate an x12-834 initial enrollment transaction for the new QHP and transmit to the Issuer of the policy

26) For any new enrollment groups
   a. FFM will process QHP enrollment into the new QHP
   b. FFM will generate an x12-834 initial enrollment transaction for new QHP and transmit to Issuer

27) In all the above cases where FFM generates an x12-834 transaction
   • Note 1: The Agent/Broker information sent by the partner website as part of the enrollment transaction will be listed as the agent/broker on the x12-834 transaction for compensation purposes
   • Note 2: If a consumer returns to the FFM directly and performs their enrollment on the FFM, none of the partner websites through which they had previously visited the FFM will be included on the x12-834 transaction

## B.6 Scenario #4 - Reporting changes not impacting eligibility

*Figure 8 - Reporting Changes not Impacting Eligibility* illustrates the interactions between the Partner Website and FFM under this scenario.

**Figure 8 - Reporting Changes not Impacting Eligibility**
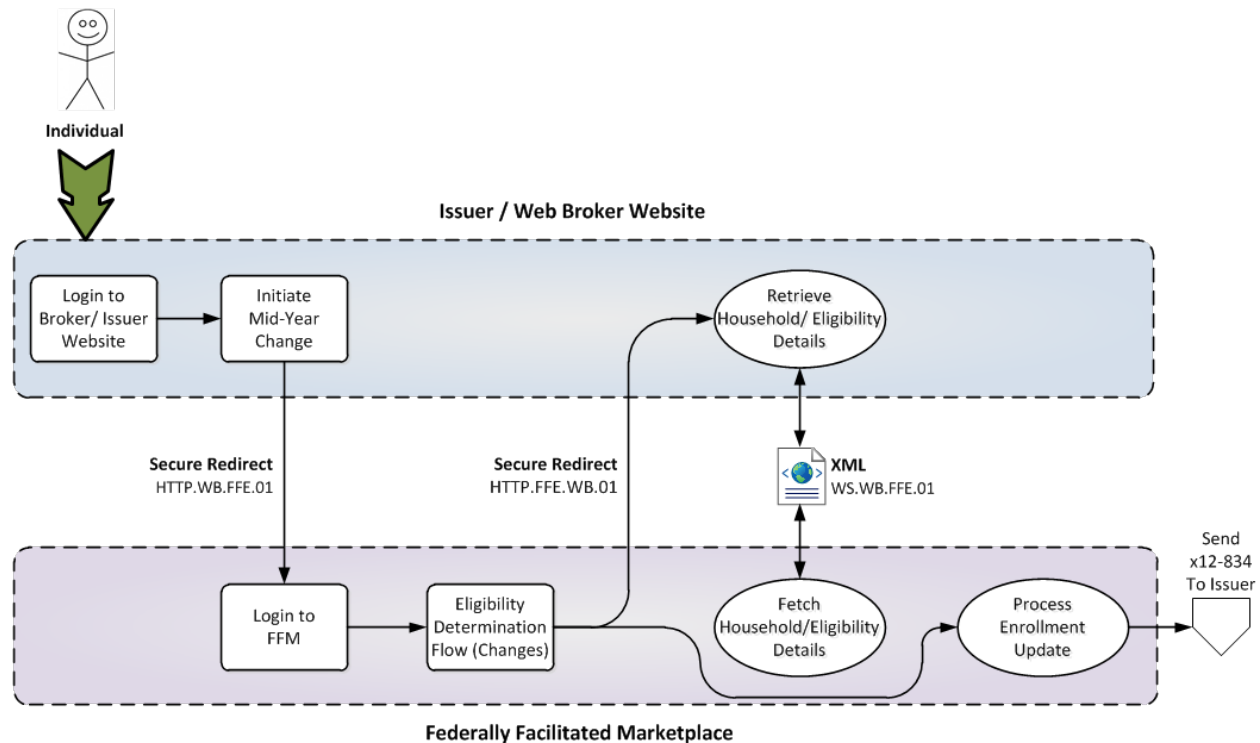


### B.6.1 Scenario Overview

In this scenario, a consumer with a household previously enrolled in a QHP with APTC/CSR returns to report changes in their household income or other demographic information. The changes do not impact their eligibility for APTC/CSR and the information update is processed by the FFM and conveyed to the Issuer.

### B.6.2 Sequence of Activities

**On Partner Website**
1) Consumer and/or members of their household are enrolled in a QHP.
2) Consumer may or may not have an account on the partner website. If the consumer has an account, they would login using their credentials for the partner website. Otherwise, they would create a new account with the partner website and be assigned a Partner Assigned Consumer ID.
3) Consumer indicates intent to enter changes to their demographic/household information for an FFM enrollment
4) Partner website transfers consumer to the FFM website. Information passed to the FFM includes:
    a. Information Exchange System ID
    b. Partner Assigned Consumer ID

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      c. FFE Assigned Consumer ID (If available)
      d. Return URL
      e. Keep-alive URL

**On FFM**

5) Consumer already has an account with the FFM and will login using their FFM credentials
6) Consumer reviews their account/application details on the FFM and enters changes where applicable. Changes could include:
    a. Changes in household income
    b. Residency changes
    c. Other Demographic changes
7) FFM verifies information entered by consumer with internal and external data sources
8) FFM determines eligibility for Medicaid, CHIP and APTC/CSR and determines no change in eligibility for any member of the household
9) FFM Updates the QHP enrollment with the new information
10) If applicable, FFM generates an x12-834 enrollment change transaction and transmits to Issuer(s) of QHP(s) in which the household is enrolled
11) FFM transfers consumer to the Return URL provided by partner website and passes back the Partner Assigned Consumer ID and FFE Assigned Consumer ID

**On Partner Website**

12) Partner website invokes the FFM Household/Eligibility web service using the FFE Assigned Consumer ID
13) Partner website receives following information from the FFM Household/ Eligibility web service
    a. Application Contact Information
    b. List of members and demographic Information required for plan shopping and enrollment. This will only include members requesting health insurance coverage (including those referred to Medicaid/CHIP)
    c. Eligibility information for each member of the household
       i. Eligibility for Medicaid/CHIP
      ii. Eligibility for APTC including Maximum Monthly APTC
      iii. Eligibility for CSR and CSR Level
      iv. Eligibility for Enrollment Period - Initial Enrollment Period (IEP), Annual Enrollment Period (AEP) or Special Enrollment Period (SEP).
      v. Flag indicating if a member has gained or lost eligibility for QHP and or APTC/CSR
    d. Enrollment status of members of the household.
14) Partner website confirms completion of change transaction

## B.7   Scenario #5 - Reporting changes leading to Disenrollment

*Figure 9 - Reporting Changes Leading to Disenrollment* illustrates the interactions between the Partner Website and FFM under this scenario.

### Figure 9 - Reporting Changes Leading to Disenrollment
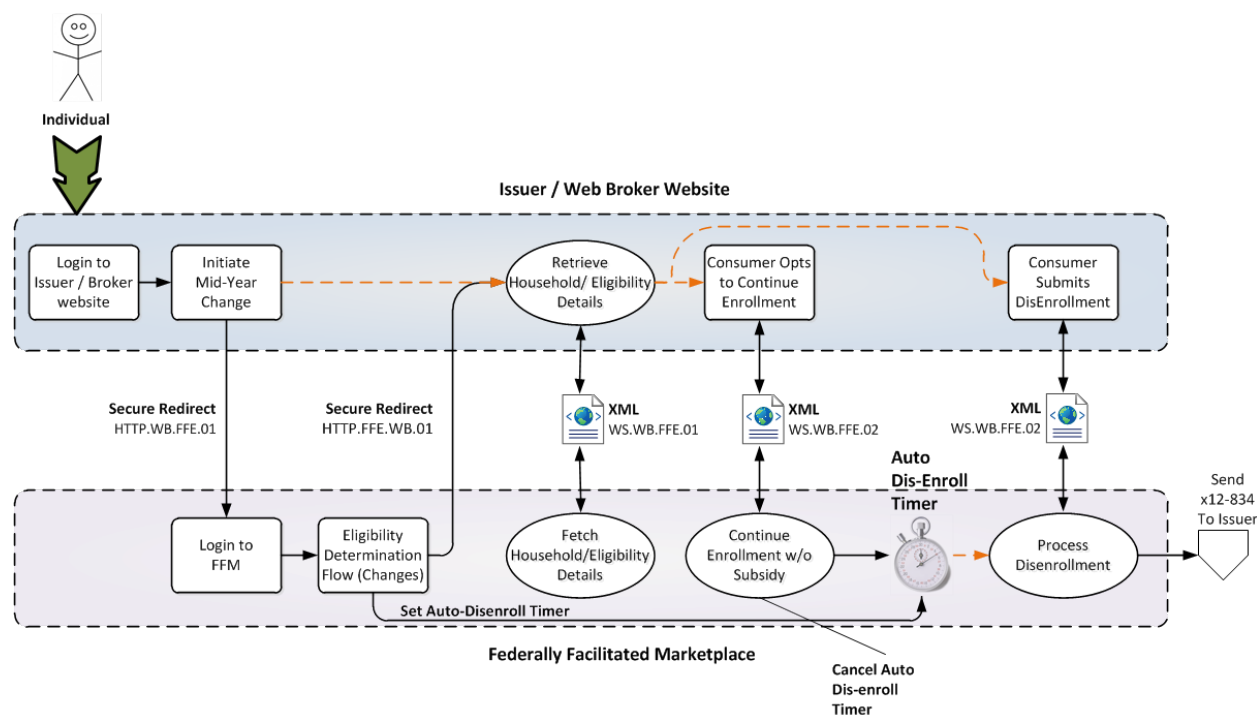


## B.7.1  Scenario Overview

In this scenario, a consumer with a household previously enrolled in a QHP with APTC/CSR returns to report changes in their household income or other demographic information. The changes result in a loss of eligibility for QHP or APTC/CSR for one or more members (including cases where members of the household become eligible for Medicaid or CHIP). In this case the members who lose APTC/CSR will be subject to automatic disenrollment unless the consumer indicates their intent to continue enrollment in the QHP without APTC and CSR.

## B.7.2  Sequence of Activities

**On Partner Website**
1) Consumer and/or members of their household are enrolled in a QHP.
2) Consumer may or may not have an account on the partner website. If they do not have an account on the partner website, they would create one. Otherwise, they would login using their credentials for the partner website.
3) Consumer indicates intent to enter changes to their demographic/household information for an FFM enrollment
4) Partner website transfers consumer to the FFM website. Information passed to the FFM includes:
   a. Information Exchange System ID
   b. Partner Assigned Consumer ID

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c. FFE Assigned Consumer ID
d. Return URL
e. Keep-alive URL

**On FFM**
5) Consumer already has an account with the FFM and will login using their FFM credentials
6) Consumer reviews their account/application details on the FFM and enters changes where applicable. Changes could include:
   a. Addition or removal of household members
   b. Changes in household income
   c. Changes in availability of other health coverage (employer sponsored or other public programs)
   d. Residency changes
   e. Other Demographic changes
7) FFM verifies information entered by consumer with internal and external data sources
8) If FFM determines that one or more members of the household have lost eligibility QHP (based on eligibility criteria for QHP - Citizenship/Lawful presence, Residency or Incarceration status)
   a. If not all members of an enrollment group lose eligibility for QHP
      i. FFM will process a QHP enrollment change transaction to remove members that lost QHP eligibility
      ii. FFM will generate an x12-834 enrollment change transaction and transmit to the Issuer of the policy
   b. If all members of an enrollment group lose eligibility for QHP
      i. FFM will process QHP disenrollment from QHP (policy level)
      ii. FFM will generate an x12-834 cancellation/termination transaction for the QHP and transmit to the Issuer of the policy
9) If FFM determines that one or more members of the household have lost eligibility for APTC and CSR (due to gaining eligibility for Medicaid/CHIP or other eligibility criteria)
   a. FFM will initiate an auto disenrollment timer for the members that lost APTC and CSR eligibility.
   b. FFM will notify the consumer on the impending auto-disenrollment of members that lost eligibility. The notice will offer the consumer the following choices:
      i. Consumer can indicate their intent to continue QHP enrollment for the members without APTC and CSR. This will cancel the auto disenrollment process.
      ii. Consumer can voluntarily disenroll the members
      iii. Take no action - Members will be automatically disenrolled by the FFM on the date indicated in the notice.
15) FFM transfers consumer to the Return URL provided by partner website and passes back the Partner Assigned Consumer ID and FFE Assigned Consumer ID
10)

**On Partner Website**

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11) Partner website invokes the FFM Household/Eligibility web service using the FFE Assigned Consumer ID
12) Partner website receives following information from the FFM Household/ Eligibility web service
    a. Application Contact Information
    b. List of members and demographic Information required for plan shopping and enrollment. This will only include members requesting health insurance coverage (including those referred to Medicaid/CHIP)
    c. Eligibility information for each member of the household
        i. Eligibility for Medicaid/CHIP
        ii. Eligibility for APTC including Maximum Monthly APTC
        iii. Eligibility for CSR and CSR Level
        iv. Eligibility for Enrollment Period - Initial Enrollment Period (IEP), Annual Enrollment Period (AEP) or Special Enrollment Period (SEP).
        v. Flag indicating if a member has gained or lost eligibility for QHP and or APTC/CSR and the date for pending auto disenrollment (if applicable)
    d. Enrollment status of members of the household.
13) Consumer is offered the opportunity to remove members who lost eligibility for APTC/CSR, from their QHP enrollments
    a. If consumer chooses this option, the partner website will invoke the FFM Enrollment web service with information on the members that the consumer chose to remove from QHP enrollment.
14) Consumer is offered the opportunity to indicate their intent to continue QHP enrollments without APTC/CSR for members that lost eligibility
    a. If consumer chooses this option, the partner website will invoke the FFM Enrollment web service with information on the members that the consumer chose to continue enrollment despite loss of APTC and CSR. FFM will cancel the Auto disenrollment timer.

**On FFM (No consumer interaction)**
15) If the consumer chose to remove one or more members that lost eligibility for APTC/CSR from QHP enrollment
    a. If not all members in an enrollment group are being removed
        i. FFM will process a QHP enrollment change request to remove members
        ii. FFM will generate an x12-834 enrollment change transaction and transmit to the Issuer of the policy
    b. If all members in an enrollment group are being removed
        i. FFM will process a disenrollment request (policy level)
        ii. FFM will generate an x12-834 cancellation/termination transaction and transmit to the Issuer of the policy

## B.8   Scenario #6 - FFM Initiated Disenrollment

Figure 10 - FFM Initiated Disenrollment illustrates the interactions between the Partner Website and FFM under this scenario.

**Figure 10 - FFM Initiated Disenrollment**
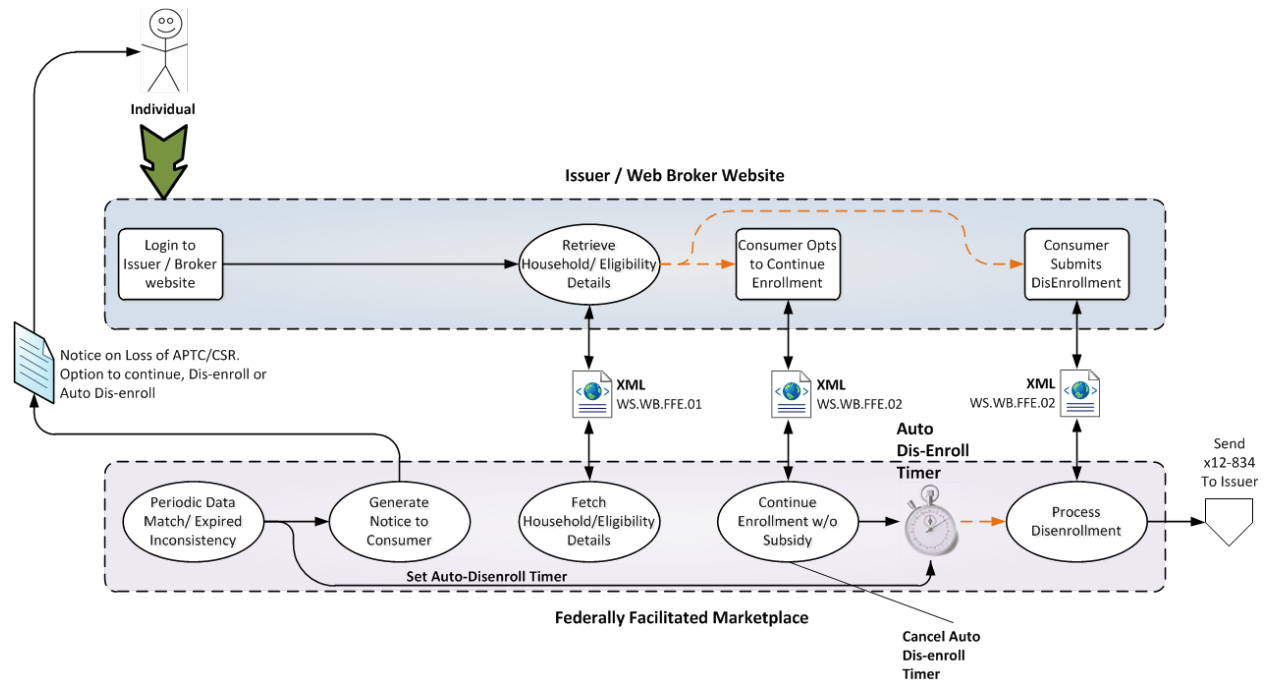


## B.8.1  Scenario Overview

In this scenario, the FFM re-determines eligibility for members receiving APTC/CSR as part of a periodic data match or on expiry of the period of reasonable opportunity to resolve verification inconsistencies. FFM will start a timer for automatic disenrollment of members who lost eligibility for APTC and CSR and notify the consumer accordingly. As part of the notice, the consumer will be presented the following options:

- Consumer can indicate their intent to continue QHP enrollment for the members without APTC and CSR. This will cancel the auto disenrollment process.

- Consumer can voluntarily Disenroll the members

- Take no action - Members will be automatically disenrolled by the FFM on the date indicated in the notice.

## B.8.2  Sequence of Activities

**On FFM (No Consumer Interaction)**
1)   Consumer and/or member of their household are enrolled in QHP(s) on the exchange
2)   FFM determines loss of eligibility for APTC/CSR for one or more members of the household due to one of following reasons:
- Periodic data match resulting in ineligibility

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- Expiry of period of reasonable opportunity for resolving verification inconsistencies

3) FFM notifies consumer on loss of eligibility for APTC/CSR and offers them the following options:

- Consumer can indicate their intent to continue QHP enrollment for the members without APTC and CSR. This will cancel the auto disenrollment process.
- Consumer can voluntarily Disenroll the members
- Take no action - Members will be automatically disenrolled by the FFM on the date indicated in the notice.

**On Partner Website**

4) Consumer already has an account with the partner website and will login using their credentials for the partner website

5) Partner website invokes the FFM Household/Eligibility web service using the FFE Assigned Consumer ID

6) Partner website receives following information from the FFM Household/ Eligibility web service

   a. Application Contact Information
   b. List of members and demographic Information required for plan shopping and enrollment. This will only include members requesting health insurance coverage (including those referred to Medicaid/CHIP)
   c. Eligibility information for each member of the household
      i. Eligibility for Medicaid/CHIP
      ii. Eligibility for APTC including Maximum Monthly APTC
      iii. Eligibility for CSR and CSR Level
      iv. Eligibility for Enrollment Period - Initial Enrollment Period (IEP), Annual Enrollment Period (AEP) or Special Enrollment Period (SEP).
      v. Flag indicating if a member has gained or lost eligibility for QHP and or APTC/CSR and the date for pending auto disenrollment (if applicable)
   d. Enrollment status of members of the household.

7) Consumer is offered the opportunity to remove members who lost eligibility for APTC/CSR, from their QHP enrollments

   a. If consumer chooses this option, the partner website invokes the FFM Enrollment web service with information on members to be removed from QHP enrollment.

8) Consumer is offered the opportunity to indicate their intent to continue QHP enrollments without APTC/CSR for members that lost eligibility

   a. If consumer chooses this option, the partner website invokes FFM Enrollment web service with information on the members that the consumer chose to continue enrollment despite loss of APTC and CSR. FFM will cancel the Auto disenrollment timer.

**On FFM (No consumer interaction)**

9) If the consumer chose to remove one or more members that lost eligibility for APTC/CSR from QHP enrollment

   a. If not all members in an enrollment group are being removed

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        iii. FFM will process the QHP enrollment change transaction to remove members

        iv. FFM will generate an x12-834 enrollment change transaction and transmit to the Issuer of the policy

    b. If all members in an enrollment group are being removed

        v. FFM will process a disenrollment request (policy level)

        vi. FFM will generate an x12-834 cancellation/termination transaction and transmit to the Issuer of the policy

### B.9  Scenario #7 - Voluntary Disenrollment by Consumer

*Figure 11 - Voluntary Disenrollment* illustrates the interactions between the Partner Website and FFM under this scenario.

**Figure 11 - Voluntary Disenrollment**
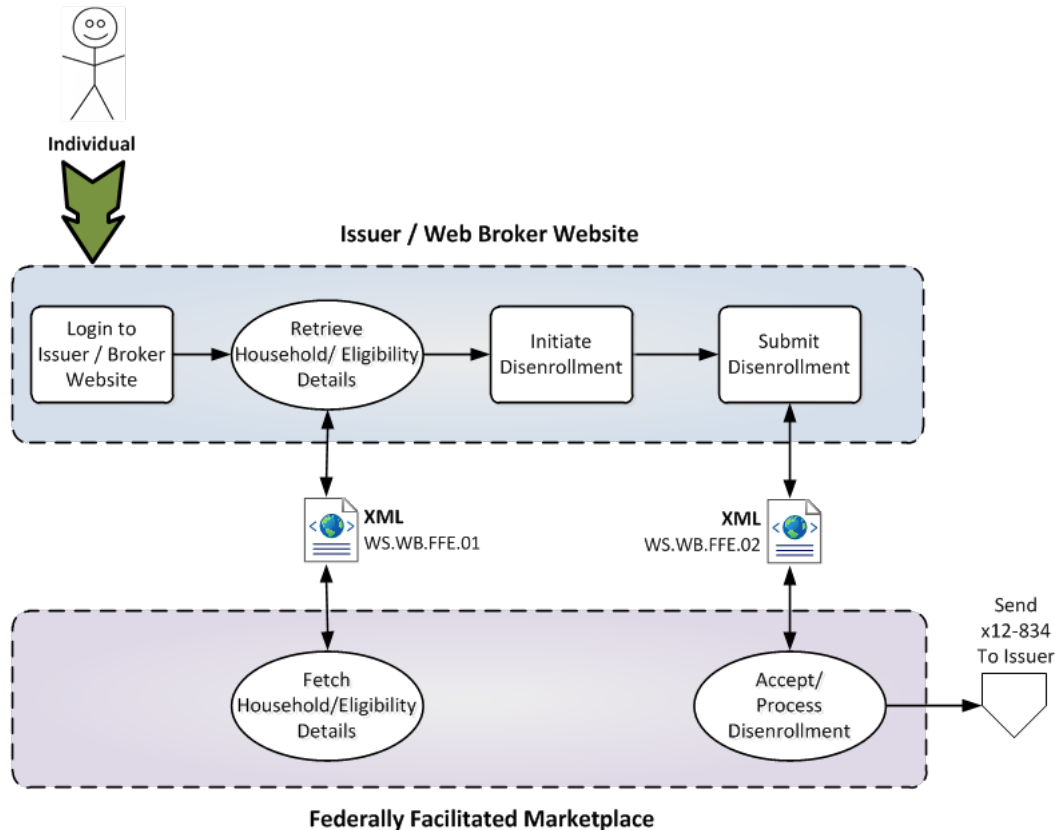


## B.9.1  Scenario Overview

In this scenario, the consumer wishes to voluntarily disenroll one or more members of their household from QHP Enrollment(s). The consumer returns to the Partner Website and indicates their intent to disenroll. The partner website will capture the disenrollment request and send it to the FFM.

## B.9.2  Sequence of Activities

**On Partner Website**
1) Consumer and/or members of their household are enrolled in a QHP on the exchange
2) Consumer already has an account with the partner website and will login using their credentials for the partner website
3) Consumer indicates intent to disenroll one or members of their household from a QHP
4) Consumer submits disenrollment request
5) Partner website invokes the FFM Enrollment Web service to perform the disenrollment request

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**On FFM (No Consumer Interaction)**

6) If the consumer chose to remove one or more members from QHP enrollment(s)

    a. If not all members in an enrollment group are being removed

        i. FFM will process a QHP enrollment change request to remove members

        ii. FFM will generate an x12-834 enrollment change transaction and transmit to the Issuer of the policy

    b. If all members in an enrollment group are being removed

        i. FFM will process a disenrollment request (policy level)

        ii. FFM will generate an x12-834 cancellation/termination transaction and transmit to the Issuer of the policy